Introduction
Regular review of emerging antimicrobial resistance is as important as the establishment of your initial practice policy. It will enable you to monitor the effectiveness of your practice protocol in reducing the emergence of resistance, while making it respond to changes in bacterial sensitivity in your practice.

The practice should establish a protocol for monitoring of emerging resistance. The guide below is designed to give a simple mechanism, but can be adapted as needed to your individual needs. Ideally bacterial culture and sensitivity will be undertaken prior to any change in antimicrobials, in a prospective manner, however the analysis of any culture and sensitivity can be used in an opportunistic manner.

Example policy for antimicrobial resistance review
This is only an example, however when establishing an individual protocol, responsibilities, timelines and criteria for interventions should be clearly identified.

Key stakeholders and role definitions:
For this policy to function several roles need to be undertaken. In order to clarify these roles they should be defined and persons should understand the implications of that role. In small practices a single person may undertake all roles. In larger practices it may involve a wider range of staff.

- **Resistance monitors**
  - Simply report each time bacteria are isolated that show a novel resistance pattern.
  - Flag to the resistance leaders when >10% of isolates are resistant to previously susceptible agent.

- **Resistance leaders**
  - Act upon this information and modify protocols if needed.

- **Resistance reporters**
Protect ME

Resistance reporters:
Resistance reporters record each time a known pathogen is cultured with in-vitro resistance to an antimicrobial where sensitivity is expected. A wall chart is available to facilitate this process and is a simple tally of results.

These could be all members of the practice who process results of bacterial culture and sensitivity. Therefore the responsibility could be delegated to each veterinary surgeon as they assess laboratory reports. Equally a laboratory technician could undertake this role for all samples as they are processed. Resistance reporters only need to make a written record and do not need to report to any individual.

Resistance monitors
Resistance monitors are responsible for identifying when resistance is common, usually when more than 10% of isolates are resistant to an antimicrobial that was likely to be effective. They should review resistance data on a regular basis as defined below.

Resistance monitors could be a nurse, technician, practice manager or veterinary surgeon. However one person should have this responsibility. Resistance monitors report to resistance leaders. Records of this activity is a useful part of clinical audit and could be provided to Practice Standard Scheme Inspectors to evidence your activities in clinical governance.

Resistance leaders:
Resistance leaders will review antimicrobial protocols where antimicrobial resistance is identified following reports from the resistance monitors. The review should involve all clinical staff where possible and the outcomes should be reported in the form of modifications to the practice responsible antimicrobial policy. The resistance leader will usually be an experienced veterinary surgeon.

Practice roles:
Personnel should sign below to confirm that they understand their role in managing antimicrobial resistance. The figures included are an example and can be adapted as required.

<table>
<thead>
<tr>
<th>Resistance reporter</th>
<th>Date appointed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Signed</td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Resistance monitor</th>
<th>Date appointed</th>
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</thead>
<tbody>
<tr>
<td>Frequency of monitoring</td>
<td>1st Tuesday of each month</td>
</tr>
<tr>
<td>Signed</td>
<td></td>
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<table>
<thead>
<tr>
<th>Resistance leader</th>
<th>Date appointed</th>
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<tbody>
<tr>
<td>Signed</td>
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