Antimicrobial utilisation rates provided in this report are calculated using the number of defined daily doses (DDDs) of the antimicrobial class consumed each month per 1,000 occupied bed days. Contributing hospitals can find their de-identifying code via the NAUSP Portal ‘Maintain My Hospital’ drop-down menu.

Peer groups are assigned according to AIHW definitions for public hospitals (1). Private hospitals are assigned by NAUSP to an AIHW peer group appropriate to their size and acuity.

A change to the DDD for a number of high volume antimicrobials occurred in January 2019. This has been applied to all retrospective data. For more information refer to WHO WTC/DDD alterations 2019.

The chart below presents aggregated contributor data over the six-month period from 1 January 2019 to 30 June 2019.

Chart 1: Total hospital antibacterial usage rates (DDD/1000 OBD) in NAUSP contributor hospitals, by peer group, South Australia, Jan–Jun 2019

Other = amphenicols, monobactams, nitrofurans, other antibacterials (linezolid & daptomycin), other cephalosporins (ceftaroline, ceftazidime-avibactam & ceftolozane-tazobactam), polymyxins, rifamycins, second-generation cephalosporins, steroids, streptogramins and streptomycin.

This report includes data from the following hospitals:

Calvary North Adelaide Hospital  
Calvary Wakefield Private Hospital  
Flinders Medical Centre  
Flinders Private Hospital  
Gawler Health Service  
Lyell McEwin Hospital  
Memorial Hospital  
Modbury Hospital  
Noarlunga Hospital  
Port Augusta Hospital  
Port Lincoln Hospital  
Queen Elizabeth Hospital  
Royal Adelaide Hospital  
St Andrew's Hospital  
Whyalla Hospital  
Women’s and Children’s Hospital

Disclaimer:
Data presented in this report were correct at the time of publication. As additional hospitals join NAUSP, retrospective data are included. Also data may change when quality assurance processes identify the need for data updates.