



Dear IPC & AMS Friends and Colleagues,

Although we have all been consumed in the demands of responding to COVID-19, we are eager to expand our thinking a bit and return to the discussion we had at WSPID2019 in Manila.

We propose to compile a paper describing **“real world problems, real world solutions” for IPC and AMS in LMIC settings**. This paper would be part of a supplement to be published by the Pediatric Infectious Disease Journal (PIDJ) in 2021 and **all contributors would be included as authors**.

To do this, we need your stories! We have generated a list of potential IPC and AMS topics that we thought would help frame our paper. Please reflect on your work over the past several years and identify 1 or 2 problems you have encountered that you think could help colleagues in other parts of the world solve the same problem OR understand the challenges of our work in LMIC. You may choose to write a short vignette about either an IPC or an AMS challenge or both!

IPC		AMS	
Area of Concern	Examples of Specific Problems	Area of Concern	Examples of Specific Problems
Water	<i>Water shortage/broken sink</i> <i>Contaminated water supply</i>	Antibiotic access	<i>Not having and/or running out of the antibiotics you need</i>
Reuse of medical equipment	<i>How to reprocess</i> <i>How to replace used or broken equipment, supplies</i>	Microbiology	<i>Not able to do blood cultures</i> <i>Not able to get results quickly enough</i> <i>Not enough funds to do all cultures needed</i>
PPE	<i>Shortages of gloves, masks, gowns</i>	Antibiotic misuse by doctors	<i>Lots of unnecessary use of broad/restricted antibiotics</i>
Sharps	<i>Insufficient numbers of needle disposal boxes</i>	Antibiotic misuse by families	<i>Families repurposing antibiotics for other uses</i>
Controlling vectors	<i>ESBL outbreak associated with flies</i>	Antibiotic resistance	<i>Not knowing who has resistant infections</i>
Medication and fluid	<i>Need to add electrolytes to IV fluid bags at the bedside</i>	Guidelines	<i>Conflicting guidelines or not having a guideline that is reliable for local use</i>
Maintenance of IV access devices	<i>Need to use medications from multi-use vials</i>		
Environmental and equipment cleaning	<i>Parents cleaning bedside around infant at the time of visit</i>	Antibiotic education to medical staff	<i>Prioritising stewardship when risk of infectious mortality is high</i>
Surveillance for HA and MDRO	<i>Point prevalence surveys</i>	Antibiotic education to public	<i>Messaging about detrimental side effects difficult to public when access is an issue</i>
Parents roles	<i>Parents doing HH observations or cleaning bedside</i>		

Please select one or two of the above topics and tell us YOUR STORY highlighting the creative solutions you've used! We suggest the following format:

- 1. Your setting:** please tell us in 2-3 sentences the clinical setting in which you work and where the problem occurred
- 2. The problem:** in 2-3 sentences describe the specific challenge you have encountered. Please give enough details that the reader will be able to imagine where this problem occurred and exactly what the problem was.
- 3. Your solution:** please tell us what you did to try to fix the problem and how it worked.

Please limit each story to no more than 350 words and send them to COFFIN@email.chop.edu and Penelope.Bryant@rch.org.au

Thank you and looking forward to learning from all of you!

Susan Coffin and Penelope Bryant

P.S if you haven't completed the '*Antimicrobial stewardship/infection control in children*' survey, we invite you to do so here: [Antimicrobial stewardship/infection control in children](#) Please also share with your colleagues.

We have too many white spaces on the map and would appreciate people from these countries to complete the survey. Thanks for your support!

