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Background

Infectious Diseases (ID) consultations by the ID Department provide recommendations on antimicrobials, diagnostics, and infection prevention. This audit aims to identify trends in implementation of these recommendations, thereby identifying practice gaps and informing local improvement initiatives.

Results

- Most frequent reason for ID consult was antimicrobials input (40%, n=20).
- The median time from consult request to ID recommendation was 22.35 hours, with 76% (n=38) of recommendations delivered within 24 hours.
- Median implementation time was 19.15 hours
- Of the 258 recommendations identified, diagnostic investigations accounting for 53% (n=136), followed by antimicrobial management (24%, n=62), specialist referral (11%, n=29), and other recommendations (12%, n=23)
- The median time from recommendation to documented implementation was 18.8 hours
- Of the 258 recommendations, 80% were 'fully implemented', 18.5% were 'not implemented' and 1.5% were 'partially implemented'.
- Adherence varied by recommendation type, with higher uptake for antimicrobial advice (97%) compared to diagnostic investigations (69%).
- Times for implementation differed by recommendation type: antimicrobial adjustments were completed rapidly (<20 hours), whereas referrals and follow-up actions exceeded 100 hours.
- Of 52 recommendations not followed through to completion, 62% (n=32) involved incomplete investigations, 13% (n=7) treatments were not implemented, 10% (n=5) had no documented action, and 8% (n=4) involved incomplete referrals.
- Among 52 deviations, the most common rationale was absence of a laboratory test order or result (n=13), incomplete procedures (n=10) or unsuitable samples (n=7).

Implementation Distribution

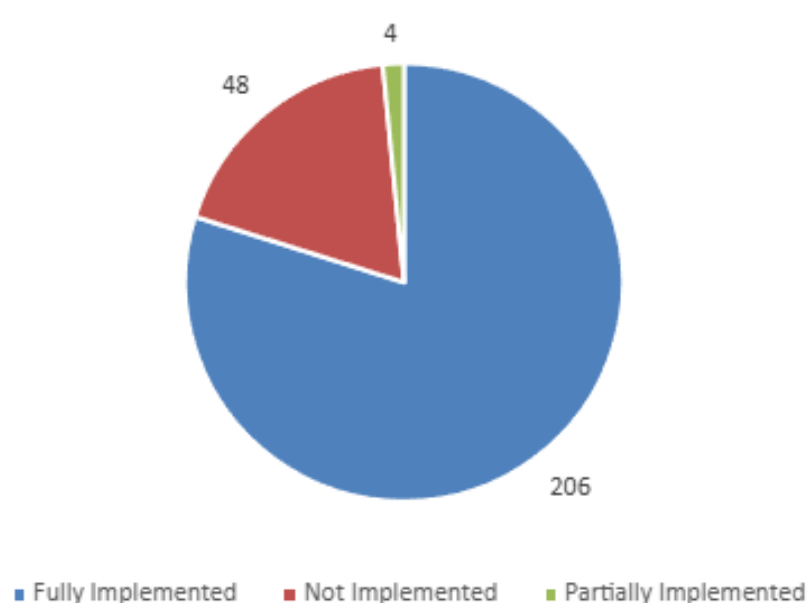


Figure 1 : Implementation Distribution

Not Implemented

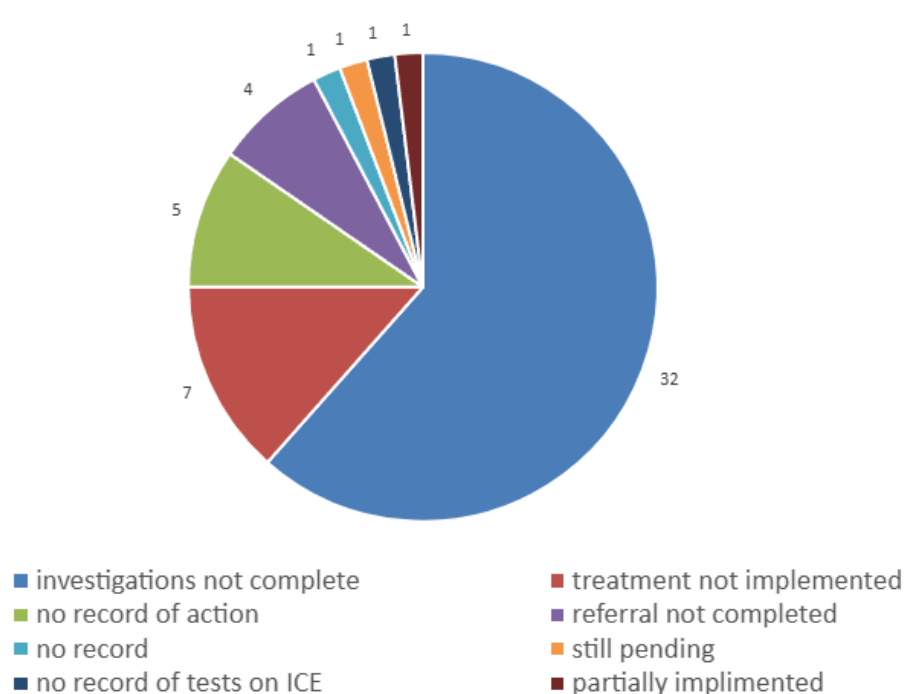


Figure 2 : Non Implementation Distribution

Methodology

A retrospective chart review of 50 inpatient ID consults attending Tallaght University Hospital from mid-January to mid-March 2026 was performed. A total of 258 recommendations were made. Data was obtained through electronic patient records (EPR). Patient demographic data was collected, as well as data pertaining to consultations; consult request date and time, reason for consult, date and time of recommendations from ID, implementation status (fully implemented, not implemented, partially implemented), time to first documented action, and documented rationale for deviation.

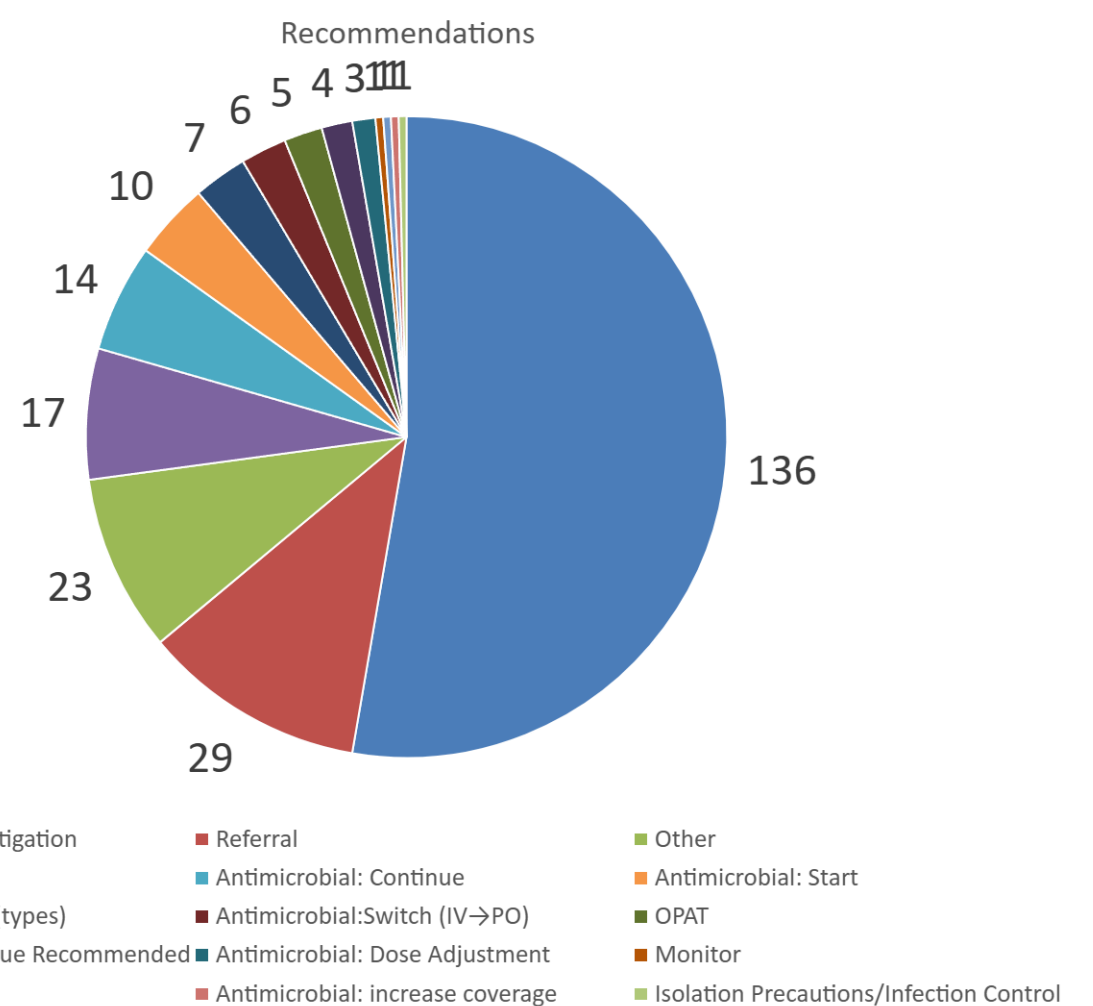


Figure 3 : Distribution of Recommendations

Discussions

This study demonstrates high overall adherence to ID recommendations; but important variation exists by recommendation type, with antimicrobial advice more consistently implemented than diagnostic and follow-up actions.

Targeted, systems-based interventions that may support more reliable implementation include; optimisation of electronic systems, improved test visibility, clearer task ownership, and closed-loop processes for ordering and follow-up.

This study has several limitations. It is retrospective in design and relies on documentation within electronic patient records, which may not fully capture all clinical actions or verbal recommendations. Some recommendations provided over the phone prior to formal documentation may not have been recorded, potentially leading to overestimation of time to recommendation.

Conclusions

Overall, ID recommendations are well integrated into clinical practice, reflecting effective multidisciplinary collaboration. The observed deviations therefore represent specific opportunities for refinement within an otherwise well-functioning system, with potential to further enhance consistency and patient safety.

A re-audit following implementation of these interventions should reassess changes in implementation rates and times across different recommendation types; specifically focusing on adherence to diagnostic recommendations and follow up actions, with comparison to baseline findings to evaluate the effectiveness of system level improvements and to determine whether improvements are sustained over time.