

**Pharmacy Name** 



## **ANTIBIOTIC AMNESTY**

## **Data Collection Form**

If you choose to participate in the 2022 Antibiotic Amnesty and would like to capture basic data about the quantity of antimicrobials returned, please use this form for documentation of anything returned between **Friday 18**<sup>th</sup> **November** (the beginning of World Antimicrobial Awareness Week) and the **31**<sup>st</sup> **December 2022** (the end of this year). While called an "Antibiotic Amnesty", we are interested in any antimicrobial medicine i.e. antibacterials, antivirals, antifungal and antiparasitic.

The data collected will help to assess the level of public engagement and may be compared with the results of similar campaigns internationally and published.

Please fill in this form, scan and e-mail to practice@psnz.org.nz

Te Whatu Ora District		
Antimicrobial Name & Strength	Dose Form	Number Collected*

<sup>\*</sup>Number of tablets or capsules, approximate mL of oral liquid (no need to measure), tubes of cream, bottles of eye drops. Does not need to be individual patients, totals are fine. Print more sheets (or add lines if using Word document) if needed. **PTO** 





Please share any feedback about <i>your experience</i> running the 'Antibiotic Amnesty' in your pharmacy e.g. practical issues, something that could be done differently.
We would be grateful to hear about feedback <i>received from your customers</i> during the Antibiotic Amnesty e.g. most common questions or any other comments.
Please share any antimicrobial returns that stick in your mind e.g. very old product or particularly large quantity.