**The Wait and See Prescription (WASP) approach may reduce resistance to antibiotics, medical costs and adverse events due to the use of antibiotics, and improve family satisfaction by using a shared decision model.**

**AOM and overuse of antibiotics**
- 12 million outpatient clinic visits annually and half of prescriptions for respiratory infections in Oregon and the U.S. are due to AOM.
- Regions of the U.S. with higher use of antibiotics have been linked to higher prevalence of C. difficile and antibiotic-resistant S. pneumoniae, the leading cause of bacterial AOM.
- 50,000 pediatric ED visits each year result from adverse events from antibiotic use.

**Who needs antibiotics?**
- **Diagnosis required middle ear effusion (MEE) plus:**
  1. Moderate to severe bulging of the tympanic membrane (TM);
  2. New onset of otalgia not due to otitis externa; or
  3. Mild bulging of the TM and recent (<48 hours) onset of ear pain or intense erythema of the TM

**Antibiotic therapy is indicated for patients with:**
1. **Severe** signs and symptoms at any age;
2. **Children <2 years with milder symptoms but bilateral disease**

**Consider antibiotics or offer observation in the following situations:**
In consultation with parent/caretaker:
1. Children 6–23 months with mild symptoms and unilateral AOM;
2. Children >2 years with mild symptoms, either unilateral or bilateral

**Evidence in support of WASP**
- Significantly reduces antibiotic use
- Unlikely to result in serious complications
- Patient satisfaction following either immediate antibiotics or WASP is very high (immediate antibiotics=92%, WASP=87%, no antibiotics=83%)

**References**

**Who treated patients with AOM, whether treated with antibiotics or not, need an assessment for pain. Oral medications are preferred due to longer duration of action.**

**Shared medical decision-making model**
- Educating parents on the benefits and risks of antibiotics
- Parent involvement in the decision of when to use antibiotics decreases use without increasing return visit rates or reducing patient satisfaction

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