

Speakers



Dr Nidhi Loomba Chlebicka
Director
ASPAC Medical and Scientific
Affairs, IDEM, Abbott



Dr Ronald Irwanto
*Internist-Infectious
Disease Specialist*
RASPRO Indonesia Study
Group / Faculty of Medicine
Universitas Trisakti, Jakarta,
Indonesia



Adj Assoc Prof See Kay Choong
Senior Consultant
Division of Respiratory and Critical
Care Medicine, Department of
Medicine, National University
Hospital, Singapore



Prof Hsu Li-Yang
*Vice Dean of Global Health and
Programme Leader of Infectious
Diseases*
Saw Swee Hock School of
Public Health, National
University Singapore, Singapore



6:39:01 pm

00:10:00

Presentation

Dr Ronald Irwanto | 02

MIMS SteffyVong

Prof Hsu Li-Yang | 04

Kelvin Lim

Utsavi Samel

Sherlock Lai

Adj Assoc Prof See Kay...

Broadcast

Juliet_MIMS

MIMS Kelvin Sor

MIMS Technical

MIMS Technical

Speaker




Dr Ronald Irwanto
Internist-Infectious Disease Specialist
RASPRO Indonesia Study Group / Faculty of Medicine, Universitas Trisakti, Jakarta, Indonesia

Dr Ronald Irwanto is an Infectious Disease Specialist and Consultant based in Jakarta, Indonesia. He holds positions at several prominent institutions, including:

- Faculty of Medicine at the University of Indonesia
- Indonesian Society of Internal Medicine
- Tzu Chi Hospital
- Pondok Indah – Bintaro Jaya Hospital
- Pondok Indah – Puri Indah Hospital

Dr Irwanto is also the founder of the RASPRO Indonesia Study Group for Antimicrobial Stewardship and the Pelita RASPRO Indonesia Foundation. Furthermore, he serves as the Chairman of the Infection Control Committee at Pondok Indah – Bintaro Jaya Hospital and as a Lecturer in the Department of Internal Medicine at the Faculty of Medicine, University of Trisakti.

Last but not least, Dr Irwanto has been recognized as the Resistance Fighter (Indonesia) by the Antimicrobial Resistance Fighter Coalition (ARFC).



5:04:46 pm

00:00:33

Presentation

Dr Ronald Irwanto | 02

Broadcast

Adj Assoc Prof See Kay...

Dr Nidhi Loomba Chlebic...

Prof Hsu Li-Yang | 04

Sherlock Lai

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The role of differential diagnosis

(viral vs bacterial infections)

• Clinical

Site of infection:

Bacterial:

“Big Four”: Pneumonia, UTI, SSTI, Intra-Abdominal
Others: Intracranial, Central Line Associated BSIs, etc

Viral:

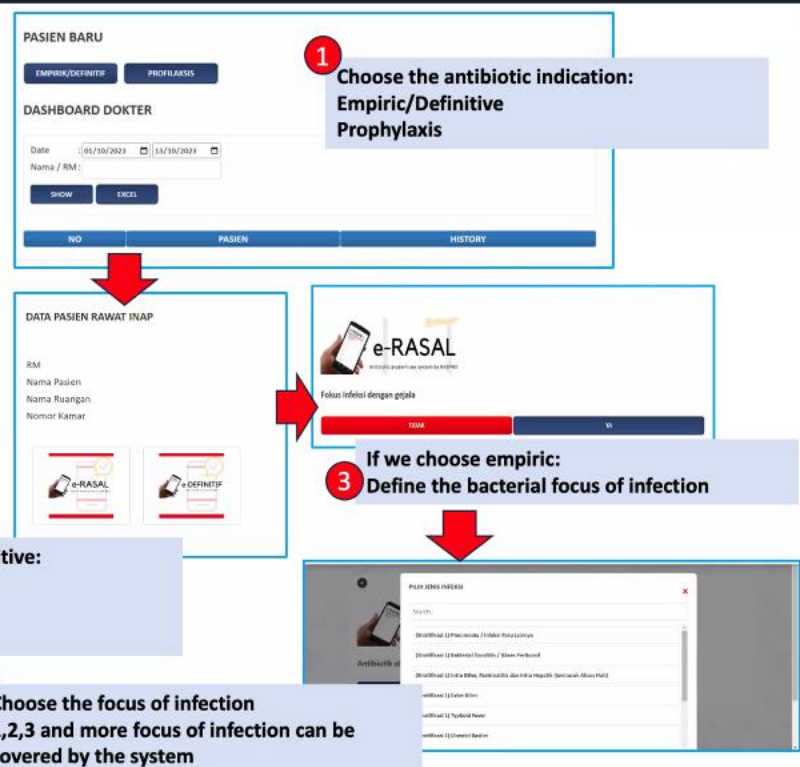
Upper respiratory tract
Lower respiratory tract – viral pneumonia
GI Tract
Unspecified

• Laboratory

Full Blood Count, CRP, Procalcitonin
Culture Finding

If the infection syndrome caused by viral
such as Influenzae, COVID-19, others

→ The antibiotic would be **RESTRICTED**



4:51:58 pm

00:13:20

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**Digital Empiric
Antibiotic Guidelines by
Patient Risk Stratification
(RASPRO Indonesia Model)**



e-DEFINITIF
Antibiotic prudent use system by RASPRO


Spesimen *

TENTUKAN FOKUS INFEKSI


Antibiotic De-Escalation
Timing
Focus of Infection
Specimen from site of infection

Ampicillin Sulbactam


Trak: 2
Coad: 1.1
Solus: 8
Indik: 1.1
REDAKSI




e-RASAL




e-RASLAN




e-RASRAJA



e-RASPATUR



e-RASGRASI



e-RASPRO

↑

Clinicians should "click" here if need to add antibiotic combination or change the empiric antibiotic by Risk Stratification system

PILIH JENIS INFEKSI

Search...

Pneumonia / Infeksi Peru Lainnya

Bakterial Tonsilitis / Abses Peritonsil

Intra Bilier dan Intra Hepatik (bermasuk Abses Hati)

Extra Bilier

Typhoid Fever

Disentri Bakter

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4:57:11 pm

00:08:08

Presentation

Dr Ronald

Dr Ronald Irwanto | 02

Broadcast

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Mute

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Participants 13

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Q&A - Panelists

Dear Panelists, selected question from the webinar will automatically populate in this list. This list is read only and cannot be edited on this page.

	A	B	C	D	E
1	Dear Panelists, selected question from the webinar will automatically populate in this list. This list is read only and cannot be edited on this page.				
3	name	question	panelistNotes		
4	Releigh Herbert Gange	What is the proper management for patients with persistent pneumonia despite of antibiotic treatment?	What is the most effective antibiotic, and proper manage in children with pneumonia. despite of giving already 2 kinds of antibiotic? suggest to Dr See and Dr Ronald		
5	Anonymous attendee	How common is viral infection with cocomitant bacterial? Can one refine from using antibiotics once viral infection eg RSV is detected? Is it safe enough?			
6	Gede Manik Saputra	Question to Dr Ronald Irawanto: Interesting findings. Based on your findings all declined antibiotics requested by clinician therefore proven as non bacterial infections? i.e culture result negative or no growth. Thank you			
7	Tak Shun Poon	Is Baloxavir superior to Tamiflu in lowering the morbidity and mortality of Influenza?	suggest to Dr See		
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9					
10					
11					
12					
13					
14					
15					

00:12:16

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