We thank Sanchez et al. (1) for their comments on our paper (2) and apologize for the confusion as to the definitions used in that study. The time frame of the retrospective chart review was 2009 to 2011. We chose to assess appropriateness of antibiotics based on criteria available at the time of prescribing, rather than on those currently available. As stated in that paper, the rapid antigen detection test for group A Streptococcus did not become readily available at the Veterans Administration in Western New York until late 2011. The guidelines from professional organizations, including the Infectious Diseases Society of America, the Cochrane Collaboration, and the American Academy of Otolaryngology-Head and Neck Surgery, were published in 2012 to 2015 (3-5). We agree that by today’s standards, assuming that practice habits did not change with updated recommendations, the numbers presented here would be underestimated. The definitions in our paper reflect data that were available in 2009 to 2011 and by no means reflect the additional knowledge gained in recent years. It would be invaluable to repeat the study since these updated guidelines were published and to determine if antimicrobial stewardship has a sizeable impact on outpatient prescribing.

REFERENCES