

Pharmacist initiated sequential intravenous to oral antibiotic therapy

-- A Resource To Help With Changing From IV To PO Antibiotics

Impact on Costs and Clinical Outcomes

Trial	Patients	Outcomes	Conclusion
Pharmacist intervention (PI), 3 study periods of 3 months each, prospective	250 CAP patients, 3 groups: IV beta-lactam + macrolide (no PI), IV beta-lactam + IV PO macrolide (PI switch), IV + PO moxifloxacin (Automatic PI sequential)	Clinical success on day 3 of therapy was improved in the PI sequential group Similar in all 3 groups on day 7 of therapy and at the end of therapy. Hospital LOS was similar (mean, 4.39 days). Antibiotic costs were significantly reduced (\$110/patient) in the PI sequential group.	IV to PO was accomplished more quickly for the same agent Reduced cost without compromising efficacy

Davis SL. Pharmacoeconomic Considerations Associated with the Use of Intravenous to Oral Monotherapy for Community-Acquired Pneumonia. CID 2005;41 Suppl 2: S118-S143.

Description: -

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Notes: Hamilton Health Sciences Corporation

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Sequential intravenous

Tuon FF, Gasparetto J, Wollmann LC, Moraes TP. Although national guidelines give general recommendations for durations of antibiotic therapy for gram-negative bloodstream infections, the optimal route of administration remains undefined.

Intravenous

To evaluate severity of illness at infection onset, ICU residence was recorded and the APACHE II score was calculated for day 1 of BSI. Urinary tract infections and pyelonephritis. A total of 2073 patient admissions were screened for inclusion, out of which 604 were excluded.

Intravenous

Exposures Oral step-down therapy within the first 5 days of treatment of Enterobacteriaceae bacteremia. Itraconazole inhibits CYP enzymes and PgP, and it results in liver toxicity.

Intravenous

Early transition to oral step-down therapy may be associated with a decrease in the duration of hospital stay for patients with Enterobacteriaceae bloodstream infections. Boyles TH, Whitelaw A, Bamford C, et al.

Diagnosis and Management of Acute Pyelonephritis in Adults

Effects of a bundled antimicrobial stewardship program on mortality: a cohort study. The work sampling method was used in the evaluation of the nursing team activities workload.

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New York, NY: McGraw-Hill Medical; 2009:835-844. Conversion from IV to PO therapy was accomplished most efficiently in the PI sequential group, with 80% of patients in this group receiving IV therapy for 3 days or less. The findings of this study will fill important knowledge gaps pertaining to the safety and efficacy of oral therapy for S.

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Of special interest, nine OOAT patients discharged on linezolid were among the returning group median duration of linezolid 14 days, range 4—42 days.

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