









IV to Oral Antibiotic Switch

This document is to be used as a guide only. Always apply clinical judgement. Refer to guidelines (e.g. *Therapeutic Guidelines: Antibiotic*) or contact the infectious diseases service for further advice.

Consider switching from IV to oral antibiotic therapy if:

<p>1</p>	<p>There is...</p> <p>No need for prolonged IV antibiotic therapy</p>  	<p>IV to oral switch is appropriate for MOST indications</p> <p>Most common indications for antibiotics such as respiratory tract infections, skin and soft tissue infections and urinary tract infections can often be managed safely with oral antibiotics.</p> <p>There are some infections that require a longer duration of IV antibiotic therapy; these may include endocarditis or central nervous system infections.</p> <p>If uncertain, discuss with the infectious diseases team.</p>
<p>2</p>	<p>Your patient is...</p> <p>Tolerating oral intake</p>  	<p>Assess the feasibility of the oral route</p> <ul style="list-style-type: none"> • Tolerating oral / nasogastric / percutaneous endoscopic gastrostomy (PEG) intake: food and/or other medications • No problems with absorption such as diarrhoea, vomiting, ileus
<p>3</p>	<p>There is an...</p> <p>Appropriate oral antibiotic available</p>  	<p>Determine if there is a suitable oral antibiotic, with a similar spectrum of activity or proven susceptibility</p> <ul style="list-style-type: none"> • Check microbiology results • Refer to endorsed guidelines (e.g. <i>Therapeutic Guidelines: Antibiotic</i>) or local guidelines
<p>4</p>	<p>Your patient is...</p> <p>Improving clinically</p>  	<p>Assess for improvement in signs and symptoms of infection</p> <p>If the patient has started on intravenous antibiotic therapy, review every day whether a switch to oral antibiotics is possible.</p>