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## **INTRAVENOUS TO ORAL/ENTERAL (IV TO PO) MEDICATION SWITCH PROGRAM**

### **Purpose**

The purpose of this program is to provide a process for changing certain parenteral medications to the oral/enteral route when medically appropriate. The advantages of this program are:

- To provide an oral/enteral dosage form with comparable bioavailability to the intravenous form, which could reduce hospital length of stay
- To avoid the added risks associated with continued intravenous therapy
- To lower overall medication and associated costs to the patient and the hospital

### **Policy**

#### **Histamine Receptor Antagonists/Proton Pump Inhibitors**

Criteria for switch: (patients must meet at least one of the Inclusion Criteria and none of the Exclusion Criteria)

##### **Inclusion Criteria**

- Able to eat a regular or modified diet
- Receiving enteral nutrition by the oral, gastric, or other appropriate enteral tube
- Receiving other scheduled medications by the oral route

##### **Exclusion Criteria**

- Unable to swallow, refuses oral medication, or is strict NPO for a procedure
- Severe nausea and vomiting, gastrointestinal obstruction, malabsorption syndrome, ileus, or severe diarrhea
- Active GI bleed

### **Procedure**

A clinical pharmacist will review patient profiles to determine eligibility for the IV to PO conversion. If the patient meets criteria, the clinical pharmacist will:

- discuss patient status with the nurse
- place a bright colored sticker on the physician order form noting that the intravenous medication will be converted to oral within the next 24 hours
- the physician must acknowledge the sticker with a signature beneath it
- the clinical pharmacist will review the chart in 24 hours and write an order in the patient chart to complete the IV to PO switch
- if the physician has not written in the chart in 24 hours, the clinical pharmacist will contact the physician before changing the order to PO
- if the physician does not want the IV to PO switch made, an order stating "continue IV" OR "do not use PO" should be written under the sticker

Any orders that are changed back to the IV form will be referred for clinical review and discussion with the prescribing physician.

## **Anti-Infective Medication Switch**

Criteria for switch: (patients must meet at least one of the Inclusion Criteria and none of the Exclusion Criteria)

### **Inclusion Criteria**

- Able to eat a regular or modified diet
- Receiving enteral nutrition by the oral, gastric, or other appropriate enteral tube
- Receiving other scheduled medications by the oral route
- Signs and symptoms of infection (i.e. fever, elevated WBC count) have resolved or are improving

### **Exclusion Criteria**

- Unable to swallow, refuses oral medication, or is strict NPO for a procedure
- Severe nausea and vomiting, gastrointestinal obstruction, malabsorption syndrome, ileus, or severe diarrhea
- Experienced severe trauma within the last 72 hours
- Active gastrointestinal bleed
- Neutropenia (ANC<500)
- Documented CNS infection
- Documented endocarditis
- Pneumonia with AIDS
- Severely immunocompromised
- Documented Pseudomonas infection and on antibiotics < 24 hours
- Candidemia treated less than 7 days
- Other infections which require extended intravenous therapy

### **Procedure**

A clinical pharmacist will review patient profiles to determine eligibility for the IV to PO conversion. If the patient meets criteria, the clinical pharmacist will:

- discuss patient status with the nurse
- place a bright colored sticker on the physician order form noting that the intravenous medication will be converted to oral within the next 24 hours
- the physician must acknowledge the sticker with a signature beneath it
- the clinical pharmacist will review the chart in 24 hours and write an order in the patient chart to complete the IV to PO switch
- if the physician has not written in the chart in 24 hours, the clinical pharmacist will contact the physician before changing the order to PO
- if the physician does not want the IV to PO switch made, an order stating "continue IV" OR "do not use PO" should be written under the sticker

Any orders that are changed back to the IV form will be referred for clinical review and discussion with the prescribing physician.

### **Anti-Infective Medications Approved for IV to PO switch**

- Azithromycin
- Fluconazole
- Fluoroquinolones (ciprofloxacin, levofloxacin)
- Metronidazole
- Clindamycin