Antibiotics IV to oral switch assessment			
Ву:	Grade	Date	Time
Patient should be switched to oral	antibiotics (ınless:	
☐ Patient is nil by mouth or not abso	orbing		
☐ No oral antibiotic option available			
☐ Patient not clinically improving			
☐ Deep seated infection			
Based on microbiology/Infection F	Pharmacist adv	vice	
Documented review between 24 a	nd 72 hours.	•	
☐ IV to oral switch with a document	ed review date	or duration of the	oral antibiotic
OPAT (Outpatient Parenteral Anti	biotic Therapy)	
☐ Continue with new review date or	duration		
☐ Change antibiotic with escalation	to broader spe	ectrum antibiotic	
Change antibiotic with de-escalat	ion to a narrov	er spectrum antil	piotic
☐ Change antibiotic e.g. to narrowe	r/broader spec	trum based on blo	ood culture results
Stop date/ review (delete as applicable) de	ue on		(date)
Antibiotics IV to oral switch a	ssessment	•	
		•	
Ву:			Time
By: Patient should be switched to oral	Grade	Date	Time
	Grade	Date	Time
Patient should be switched to oral	Grade antibiotics (Date	Time
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