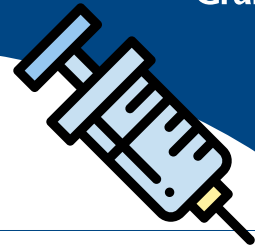
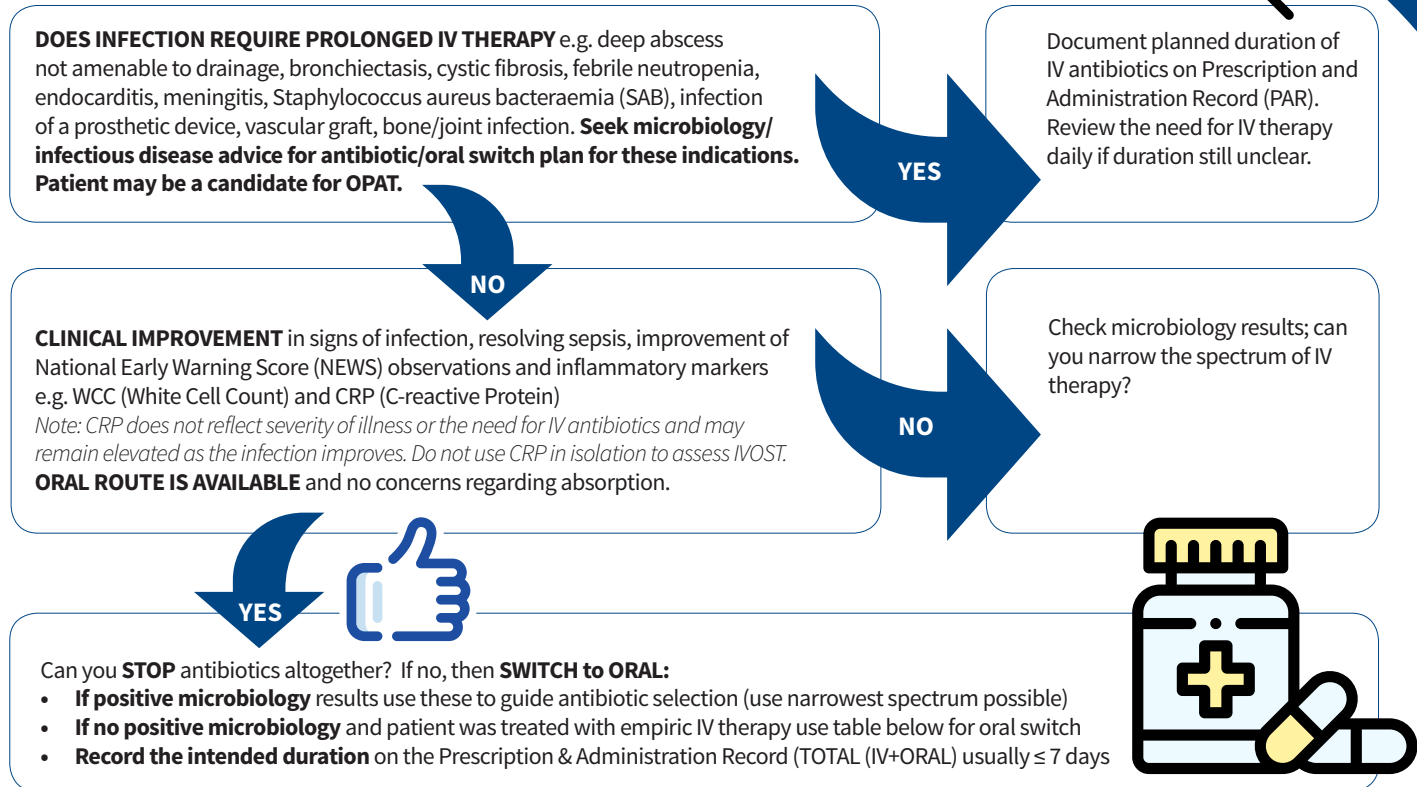


# Adult Antibiotic Intravenous to Oral Switch Therapy (IVOST) Guidance

- Intravenous (IV) antibiotics must be reviewed daily.
- Stop antibiotics unless there is clear evidence of infection.
- Document the patient's progress and the full antibiotic plan within 24-72 hours.



## Is your patient ready for IVOST?



Indication	Empiric Oral Switch* (1st line)	Empiric Oral Switch* (2nd Line)	Total Duration (IV + Oral)
Community Acquired Pneumonia (High severity-no previous antibiotic)	Doxycycline 100mg 12 hourly	Amoxicillin 1g 8 hourly plus Clarithromycin 500mg 12 hourly (until atypical excluded)	7-10 days
Community Acquired Pneumonia (High severity – previous antibiotics)	Doxycycline 100mg 12 hourly	Co-trimoxazole 960mg 12 hourly	7-10 days
Severe Hospital Acquired Pneumonia	Co-amoxiclav 625mg 8 hourly	Levofloxacin 500mg 12 hourly	7-10 days
Aspiration pneumonia	Amoxicillin 1g 8 hourly plus Metronidazole 400mg 8 hourly	Clarithromycin 500mg 12 hourly plus Metronidazole 400mg 8 hourly	7 days
Severe Infective Exacerbation of COPD	Co-trimoxazole 960mg 12 hourly OR Doxycycline 100mg 12 hourly	Clarithromycin 500mg 12 hourly	7 days
Pyelonephritis/Urosepsis	Co-trimoxazole 960mg 12 hourly		7 days (if urinary tract abnormality consider 10-14 days)
Intra-abdominal sepsis	Metronidazole 400mg 8 hourly plus Doxycycline 100-200mg daily	Metronidazole 400mg 8 hourly plus Co-trimoxazole 960mg 12 hourly	3-5 days
Biliary Sepsis	Doxycycline 100-200mg daily +/- Metronidazole 400mg 8 hourly	Co-trimoxazole 960mg 12 hourly +/- Metronidazole 400mg 8 hourly	7 days
Cellulitis (moderate to severe)	Flucloxacillin 1g 6 hourly	Doxycycline 100mg 12 hourly	7-14 days

\*All doses are for normal renal/hepatic function. See BNF/SPC or seek pharmacy advice regarding dose adjustments or drug interactions.

The antibiotics tabled are suitable for IVOST once the initial bacterial burden has been sufficiently reduced by intravenous therapy.