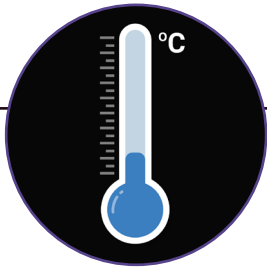


**Aim:** advantages to prompt switching include: reduced likelihood of hospital acquired bacteraemia and phlebitis/ infected IV lines; reduced medical and nursing time; ease of administration; reduces discomfort for patients and enables improved mobility and the possibility of earlier hospital discharge; reduced treatment costs; patient is more likely to receive antibiotics at the correct time; reduced risk of adverse effects; reduced errors in preparation of medication.

Use the **ACED** it tool to consider Intravenous (IV) to oral switch if the following conditions are met:



### AFEBRILE

Temperature between 36-38°C for the past 24 hours



### CLINICALLY IMPROVING

Improved physical observations (BP; Pulse, Respiratory rate, confusion, (Oxygen Saturations))



### EATING AND DRINKING

Patient is tolerating oral food. No vomiting or diarrhoea within the last 24 hours. No evidence of malabsorption



### Not a **Deep-Seated**...

or high-risk infection, e.g. Bloodstream infection, neutropenic sepsis, undrained abscess, severe or necrotising soft tissue infection, septic arthritis, meningitis, osteomyelitis, infected implants / prosthesis, endocarditis

Ensure suitable oral antibiotics are chosen, ideally those with good bioavailability, e.g., ciprofloxacin, co-trimoxazole, metronidazole, amoxicillin, clindamycin, with doses and durations in keeping with antibiotic guidelines and according to source of infection.

### Duration of treatment

- Duration of treatment is dependent on indication/ source of infection and individual response to treatment.
- Recommended treatment durations are provided in the antibiotic prescribing guidelines.
- Antibiotic therapy should be stopped earlier if there is no clinical evidence of infection.
- Duration of antibiotic courses should be minimised whenever possible.
- The duration of treatment should be documented clearly following review (include IV and oral doses for total duration).

### References

1. WHO. [Antimicrobial Stewardship Programmes in Health-care Facilities in Low-and-Middle Income Countries. A WHO practical Toolkit](#), 2019
2. UKHSA. [Start smart then focus: antimicrobial stewardship toolkit for inpatient care settings](#), 2023
3. UKHSA. [Antimicrobial intravenous-to-oral switch: criteria for prompt switch](#), 2024