IV to PO Antibiotic Step-Down Guidelines

Candidates for Antimicrobial Step-Down therapy:

- Patient is able to tolerate PO medication AND has a functioning GI tract
- The infection is treatable with oral antimicrobial therapy **AND** the indications and spectrum of activity are identical or similar between alternative drugs
- No evidence of malabsorption, dysphagia, or gastrointestinal bleed
- Patient is hemodynamically stable with improving body temperature and WBC
- High risk patients who <u>MAY NOT</u> be candidates for PO step-down may be identified by:
 - Pulse >125bpm
 - RR >30bpm
 - Systolic BP < 90 mmHg
 - T < 35°C OR >40°C, altered mental status

Contraindications to Antimicrobial Step-Down therapy:

- Serious infections concomitant with chemotherapy induced severe neutropenia
- Infections caused by resistant organisms (i.e. MRSA, VRE) unresponsive to >1 course of antimicrobials
- Situations where oral antimicrobials may not achieve adequate drug concentrations at the site of infection (i.e. meningitis, endocarditis)
- Oral antimicrobial therapy may be used in neutropenic patients with negative blood cultures, temperatures < 38°C, and no indication of clinical sepsis

Table 1. IV to PO Antimicrobial Step-Down Options

IV Antimicrobial	PO Antimicrobial
Ampicillin/sulbactam	Amoxicillin/clavulanate
Azithromycin	Azithromycin
Cefazolin/Ceftazidime	Cephalexin/Cephadrine
Ciprofloxacin	Ciprofloxacin*
Ceftriaxone	Cefpodoxime
Cefuroxime	Cefuroxime axetil
Clindamycin	Clindamycin*
Doxycycline	Doxycycline
Fluconazole	Fluconazole*
Moxifloxacin	Moxifloxacin *
Metronidazole	Metronidazole*
Nafcillin	Dicloxacillin
Trimethoprim/sulfamethoxazole	Trimethoprim/sulfamethoxazole*

^{*}Oral drugs which achieve serum levels similar to the parenteral dose form

BP= blood pressure; bpm= beats/breaths per minute; GI= Gastrointestinal; IV= intravenous; MRSA= Methicillin-resistant Staphylococcus aureus; PO= by mouth; RR= Respiratory rate; T= temperature; VRE= Vancomycin-resistant enterococci; WBC= White blood cells