

GO GREEN VOST

If your patient is prescribed INTRAVENOUS antimicrobial therapy review DAILY and consider the SWITCH to ORAL therapy = IVOST









Are all **PATIENT** criteria met for **IVOST?**

 Clinical Improvement Oral route reliably available Gut absorption not compromised Uncomplicated infection



Higher cost & more plastic waste

IVOST

GO GREEN

If YES refer to the NHSGGC VOST policy and SWITCH from IV to ORAL therapy - If complex* infection discuss with micro/ID

ADVANTAGES of timely and appropriate **VOST**:

- Improved antimicrobial stewardship
- Reduced patient risk of line infections & complications
- Improved patient comfort & mobility
- Reduced nursing & medical workload
- Reduced cost-IV route more expensive than oral tablets
- Improved sustainability & reduced plastic waste





24 hours oral IVOST option



NOTE the agents below have EXCELLENT ORAL BIOAVAILABILITY (absorption) often enabling earlier IVOST

Antimicrobial	Oral Bioavailability	Advantages of the Oral Route
METRONIDAZOLE	>90%	Gets patients home sooner
CO-TRIMOXAZOLE	>90%	Optimises antimicrobial stewardship
CLINDAMYCIN	>90%	Global antimicrobial risk reduced
LEVOFLOXACIN	100%	
CIPROFLOXACIN	80%	Reduced patient risk of line infections/complications
FLUCONAZOLE	>90%	Environmental plastic waste & carbon footprint reduced
RIFAMPICIN	>90%	Efficiency is improved reducing staff workload & costs
LINEZOLID	100%	Nursing time saved supports improved patient centred care

If the following **PATIENT** criteria are met:

ORAL METRONIDAZOLE



 Oral route reliably available Gut absorption not compromised No clinical deterioration/systemic sepsis*

Consider ORAL rather than V therapy- GO GREEN!

* If complex infection e.g CNS infection, cystic fibrosis, endocarditis, S. aureus bacteraemia, bone/joint infection, undrainable deep abscess discuss with micro/ID



IV METRONIDAZOLE

Prepared by NHSGGC Antimicrobial Pharmacist Team & Approved by NHSGGC AUC Feb 2024 Review Feb 2027