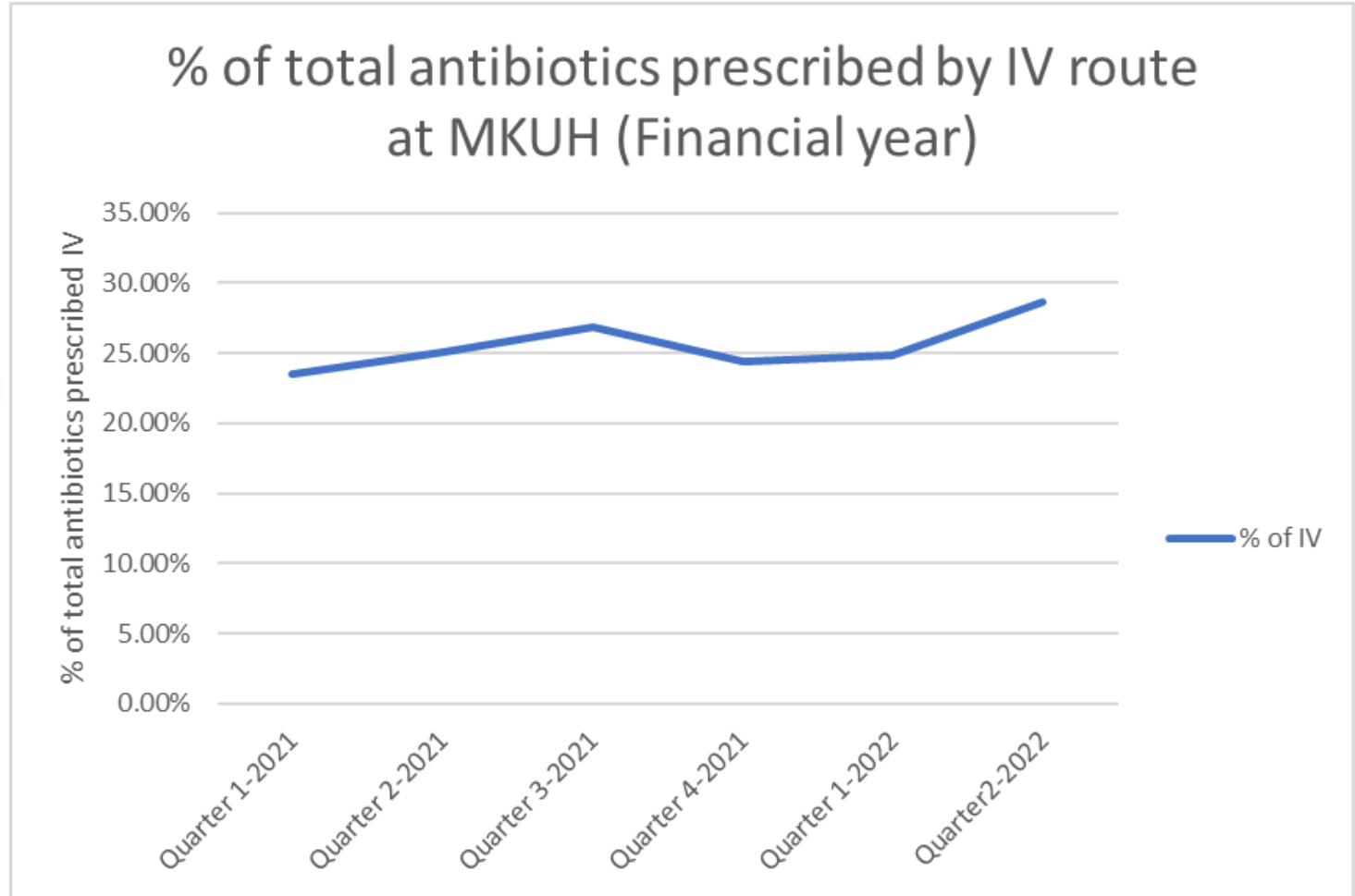


IVOS at Milton Keynes University Hospital – A Pharmacist Led Approach

Lauren Ramm- Lead Antimicrobial Pharmacist

Starting point

- % IV use compared to PO gradually increasing over time
- 28% of antibiotics prescribed IV in the quarter prior to project initiation
- IV to PO switch highlighted as a regional priority



Aim



To reduce the proportion of IV antimicrobial use from 28% to <20%



To increase awareness and engagement around IV to PO switch around the organisation

PDSA Cycle



MKUH Action Plan

1

Raise awareness of nurse prompted IV to PO switch during world antimicrobial awareness week

2

Review and update the IV to PO switch policy- enable non prescribing pharmacists to make IV to PO switches

3

Promote IV to PO switch and the importance of it during consultant led antimicrobial ward rounds

4

Undertake teaching sessions for pharmacists and nurses on IV to PO switch

5

Monitor IV antimicrobial use more closely and the appropriateness of continued IV therapy

Baseline Audit Data

Small retrospective snapshot audit of 4 wards

20 patients included

35% of patients were appropriate for an IV to PO switch at the point of audit

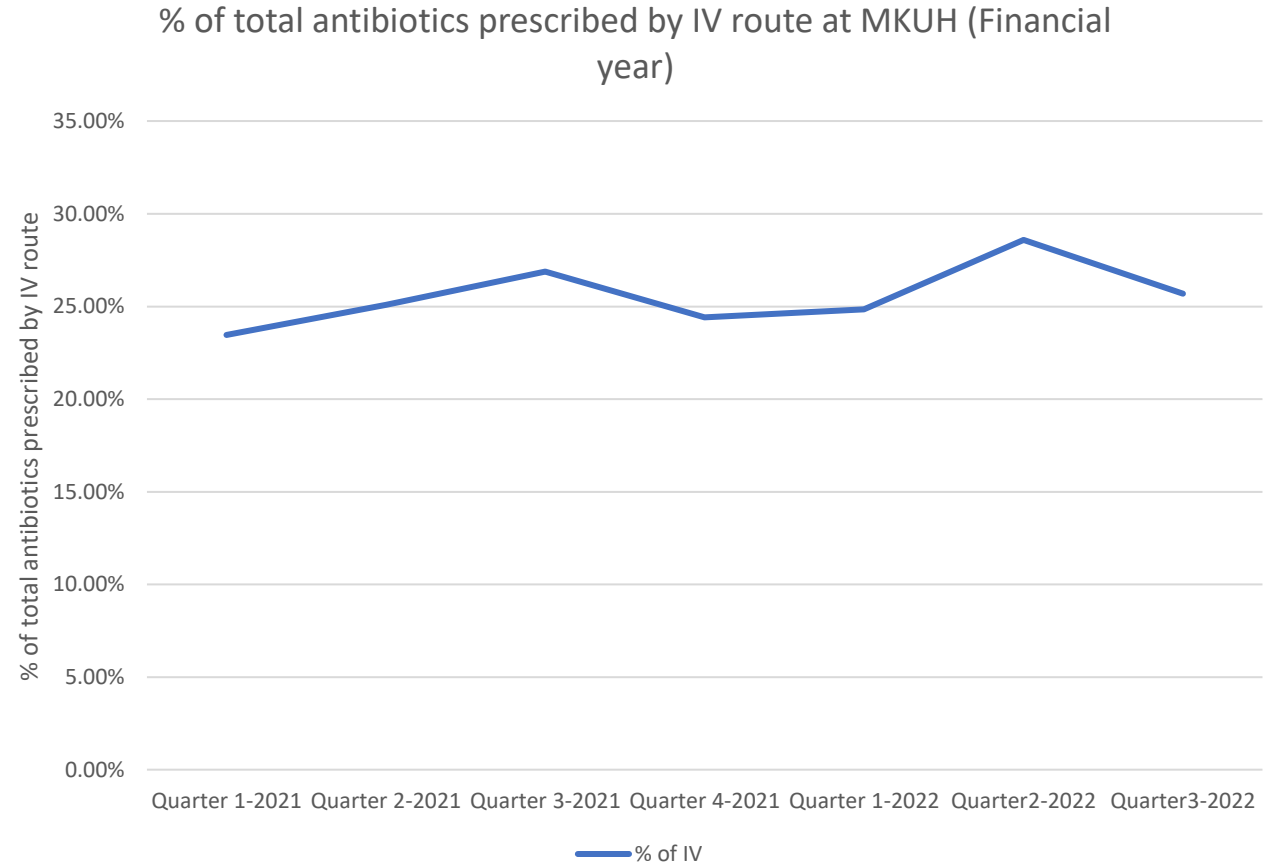
Average of 3.4 days IV treatment at the time of audit

Total average duration of IV treatment 6.55 days

On average if IVOS deemed appropriate at the time of audit, an extra 2 days of IV Abx given before switch performed

Data on patient outcome and re-initiation of IV antibiotics for the same infection during admission still being collated.

- Intervention started in Quarter 3 of 2022
 - Slight decrease in IV use since this
 - Hoping to see further decrease in the upcoming financial year.



Future Plan



Continued teaching sessions



Further roll out of pharmacist led IV to PO switch



Look at possibilities within electronic prescribing system to prompt IV to PO switch



Introduce IVOS decision support tool on Microguide App



Re-audit