

### **Pharmacist Driven Intravenous (IV) to Oral (PO) Conversion Protocol**

#### **Procedure:**

The following medications, due to their unique properties of having the intravenous and oral routes of administration being therapeutically equivalent and interchangeable, will be included in the protocol:

**AZITHROMYCIN (ZITHROMAX)**  
**CIPROFLOXACIN (CIPRO)**  
**DOXYCYCLINE (VIBRAMYCIN)**  
**FLUCONAZOLE (DIFLUCAN)**  
**LEVOFLOXACIN (LEVAQUIN)**  
**LINEZOLID (ZYVOX)**  
**METRONIDAZOLE (FLAGYL)**

The following criteria must be met prior to the patient being switched from the intravenous to the oral route of administration of the above medications:

1. **Patient must show a trend of steady, or decreasing, temperatures (For antibiotics)**
2. **Patient must show an improving WBC (For antibiotics)**
3. **Patient must be able to swallow/absorb Oral Medications (As evidenced by being on other oral medications, or a minimal diet of clear liquids)**

The following standardized medication conversions will be applied for those patients meeting the conversion criteria:

MEDICATION	INTRAVENOUS DOSE	ORAL DOSE
Azithromycin (Zithromax)	500 mg IVPB or 250 mg IVPB	500 mg po or 250 mg po
Ciprofloxacin (Cipro)	400 mg IVPB	500 mg po
	200 mg IVPB	250 mg po
Doxycycline (Vibramycin)	100mg IVPB	100mg PO
Fluconazole (Diflucan)	100mg-400mg IVPB	100mg-400mg PO
Levofloxacin (Levaquin)	500 mg IVPB	500 mg po
	250 mg IVPB	250 mg po
	750 mg IVPB	750 mg po
Linezolid (Zyvox)	600 mg IVPB	600 mg po
Metronidazole (Flagyl)	500 mg IVPB	500 mg po
	250 mg IVPB	250 mg po

The following changes in frequencies will be utilized when converting medications from the Intravenous formulation to the oral formulation:

INTRAVENOUS FREQUENCY	ORAL FREQUENCY
DAILY	DAILY
Q12 HOURS	BID
Q8 HOURS	TID
Q6 HOURS	QID

**PROTOCOL:**

1. The Department of Pharmacy will initiate monitoring of patients on the day that intravenous therapy with any of the protocol medications is started.
2. After completion of the second full day of Intravenous therapy, the Pharmacy Department will apply the conversion criteria to the applicable patients.
3. The Pharmacy Department will automatically enter a verbal order changing the route of administration from the intravenous to the oral, for all patients meeting the conversion criteria. This order will be entered prior to administration of the third day of intravenous therapy. Please note: All medication changes must be verified for appropriateness by a second Pharmacist prior to being instituted.
4. Those patients not meeting the conversion criteria at the end of the second day of intravenous therapy will be monitored each day until the conversion criteria are met.
5. Physicians desiring not to have the protocol applied will write: **“Do Not Substitute”** in the comment section of the order at the time the initial order is entered.