

Online Appendix. Clinical intervention form

Antimicrobial Stewardship Campaign
Pharmacy Hospital _____

Switch IV to ORAL?

This patient has met the criterias for IV-Oral antibiotic switching on _____, Day _____ of IV _____

- ✓ Clinically improving
- ✓ Able to tolerate orally
- ✓ No signs of sepsis
- ✓ Temperature < 38°C for past 24 hours
- ✓ No specific need for high tissue concentration/prolonged IV route (*eg endocarditis, osteomyelitis, meningitis, bone and joint infection, Staphylococcus aureus bacteraemia, melioidosis*)

Suggest to switch to oral antibiotic _____

For Medical Officer's feedback

- Agree to switch today
- Agree to switch on a later day
[Pls state reason(s) : _____]
- Disagree on early IV-Oral switch for this patient
[Pls state reason(s) : _____]