Name of Policy: **Automatic IV to Enteral Medication** THE UNIVERSITY OF TOLEDO Conversion **Policy Number:** 3364-133-84 **Department:** Pharmacy Senior Hospital Administrator **Approving Officer: Responsible Agent:** Director of Pharmacy **Effective Date: 4/25/2022** University of Toledo Medical Center **Initial Effective Date**: 8/1/2012 Scope: Minor/technical revision of existing policy New policy proposal

Reaffirmation of existing policy

## (A) Policy Statement

Major revision of existing policy

The University of Toledo Medical Center (UTMC) department of pharmacy will monitor targeted parenteral medications from a specified medication list stated below. If appropriate, the pharmacist may substitute the enteral equivalent of the ordered intravenous drug.

## (B) Purpose of Policy

IV to enteral programs have been shown to decrease drug acquisition costs, drug-related costs (preparation, administration) and overall hospital costs as well as reduce hospital lengths of stay. Conversion to the enteral route has also been shown to have similar efficacy as the IV route in both clinical and bacteriologic response rates.

## (C) Procedure

- 1. All automatic IV to enteral medication conversions shall be approved by the P&T Committee and the Medical Executive Committee prior to implementation.
- 2. Pharmacy will identify patients on targeted IV medications via the pharmacy patient profile or a daily utilization report. The pharmacist is responsible for reviewing the patients for a possible change in route of administration.
- 3. Pharmacists will determine whether a patient's IV therapy may be switched to enteral therapy based on meeting ALL inclusion criteria and NONE of the exclusion criteria set forth below.
- 4. Eligible patients will be automatically converted to an equivalent enteral dose. All patients in ICU status will not be considered eligible for the automatic IV to enteral conversion policy.
- 5. If appropriate, the pharmacist will discontinue the targeted IV drug and order for the equivalent enteral drug, dose, route and frequency. The order will be processed and entered into the pharmacy system.
- 6. The pharmacist will indicate in the medication order for the enteral therapy that it was changed 'per policy' or 'per privilege', as appropriate, for documentation of change.
- 7. If a physician disagrees with the automatic conversion, he/she may override the conversion by noting that the patient is to remain on the IV dosage form in the comment section of the order.
- 8. The prescriber may also write "Do Not Substitute" on the initial order for the targeted medication to avoid automatic IV to enteral conversion. Upon order entry, the pharmacist will make note in the comment section "Do Not Substitute" and add an attachment to that order stating such.
- 9. If the patient is taking an anti-infective, the enteral alternative will be entered with a stop date adjusted for the number of days that the patient received IV anti-infective therapy. For example, if the patient already received 2 days IV therapy of a 7 day treatment, the new order for the enteral therapy will be entered with a 5 day stop date.
- 10. If the pharmacist is unsure of advisability of conversion, he/she should err on the side of **NOT** converting to enteral therapy and should contact the prescribing physician to further discuss if the

- conversion is appropriate. If the physician agrees with the IV to enteral change, the pharmacist may proceed with policy procedures.
- 11. Pharmacy will keep a record of all automatic substitutions made each day by entering a clinical intervention in the pharmacy system. This data then can be regenerated to determine pharmacoeconomic outcomes for UTMC and if adjustments to the initial guidelines need to be made.
- 12. Pharmacist interventions, conversions, and reviews of therapy will be documented in the electronic medical record.

Approved by:		Review/Revision Date:
/s/ Lindsey Eitniear, PharmD, BCPS, AAHIVP Director of Pharmacy	04/25/2022 Date	8/12 4/13 12/13 5/16 4/19 7/19 4/22
/s/ Russell Smith, PharmD, MBA, BCPS Senior Hospital Administrator	04/25/2022 Date	
Review/Revision Completed By: Pharmacy		Next Review Date: 4/1/2025

It is the responsibility of the reader to verify with the responsible agent that this is the most current version of the policy.