



The objective of the study is to evaluate whether patients with cellulitis can be safely discharged from a 24-hour clinical decision unit (CDU) with home infusion of intravenous (IV) antibiotics”  
Rentala et al (2016).

Abstract:

**OBJECTIVES:** The objective of the study is to evaluate whether patients with cellulitis can be safely discharged from a 24-hour clinical decision unit (CDU) with home infusion of intravenous (IV) antibiotics.

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**METHODS:** Clinical decision unit patients receiving IV antibiotics for cellulitis were screened for enrollment in a home infusion therapy (HIT) program. Inclusion criteria were patient ability and willingness to administer IV antibiotics at home and insurers’ approval of home infusion services. Patients were discharged home with a peripheral IV and care coordinated with a home infusion provider.

**RESULTS:** Of 213 patients with cellulitis transferred from the emergency department to the CDU over an 8-month study period, a total of 32 (15%) were discharged from the CDU with

HIT. The average duration of home IV antibiotic treatment was 3.4 days. There were a total of 9 complications (28%), including IV infiltration (n = 5), allergic reactions (n = 2), nontolerance to the antibiotic (n = 1, this patient developed severe nausea and was switched to oral antibiotics after 2 days of HIT), and 1 patient required readmission for lack of clinical improvement. Among the 181 patients with cellulitis who did not receive HIT, 39 (22%) were hospitalized from the CDU, and 1 additional patient refused admission.

**CONCLUSIONS:** We avoided admission for 31 (97%) of 32 patients who were enrolled in HIT. Home infusion therapy has the potential to prevent hospitalizations, alleviate overcrowding of hospital beds, and decrease health care costs. Further studies are needed to determine the full impact of HIT on CDU patients with acute cellulitis.

Reference:

Rental, M., Andrews, S., Tiberio, A., Alagappan, K., Tavdy, T., Sheppard, P. and Siliverman, R. (2016) Intravenous home infusion therapy instituted from a 24-hour clinical decision unit for patients with cellulitis. *The American Journal of Emergency Medicine*. April 16th. .

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