TITLE: Intravenous Admixture for Antibiotics: Safety

DATE: 08 January 2009

RESEARCH QUESTION:

What is the evidence for the safety of using intravenous (IV) admixture to prepare intravenous antibiotics?

METHODS:

A limited literature search was conducted on key health technology assessment resources, including PubMed, the Cochrane Library (Issue 4, 2008), University of York Centre for Reviews and Dissemination (CRD) databases, ECRI, EuroScan, international health technology agencies, and a focused Internet search. Results include articles published between 2003 and January 2009, and are limited to English language publications only. Filters were applied to limit the retrieval to health technology assessments, systematic reviews, meta-analyses, guidelines, randomized controlled trials, controlled clinical trials, and observational studies. Internet links are provided, where available.

RESULTS:

HTIS reports are organized so that the higher quality evidence is presented first. Therefore, health technology assessment reports, systematic reviews, and meta-analyses are presented first. These are followed by randomized controlled trials, controlled clinical trials, observational studies, and evidence-based guidelines.

The literature search did not identify any health technology assessments, systematic reviews, meta-analyses, randomized controlled trials, or observational studies on the safety of using IV admixture to prepare intravenous antibiotics. One controlled clinical trial and two guidelines were identified, but these are not specific to intravenous antibiotics. Additional articles of potential interest are included in the appendix.
Health technology assessments
No literature identified.

Systematic reviews and meta-analyses
No literature identified.

Randomized controlled trials
No literature identified.

Controlled clinical trials

Observational studies
No literature identified.

Guidelines and recommendations


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APPENDIX – FURTHER INFORMATION:

Observational studies


Review articles


Additional references

