Title	Changing Opioid Routes or Formulation – development of a switching table to guide safe practice.
Number	9
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Abstract	Background: Opioid rotation and switching the administration route of opioids are common practices within palliative care. The vast differences in the pharmacokinetic properties between oral, parenteral and transdermal opioid preparations complicates the practice of opioid switching and contribute to medication errors. Although opioid conversion ratios are readily accessible, availability of tools to guide the safe switching of opioid formulations or from different routes of administration are less evident. Aim: To develop a tool which could be used by all healthcare clinicians to optimise the safe switching of opioid analgesics.
	Methods: An opioid switching table was developed based on current literature, and piloted in both inpatient and community palliative care settings. Pre and post surveys of clinical staff were undertaken to assess knowledge of switching between opioid formulations. The post pilot survey also assessed clinicans' experiences using the switching table. Results: This pilot revealed knowledge gaps concerning recommended methods for switching opioid formulations. The switching table was found to be easy to use and improved doctors and nurses confidence in safely switching opioids.
	Conclusion: An opioid switching table was identified to be a helpful resource to assist healthcare clinicians. Further research is required to investigate whether use of a switching tool reduces medication errors.