Dr. Michael Nailor’s Scholarship

Book Chapters:


Publications:


Raman K, Nailor MD, Nicolau DP, Aslanzadeh J, Nadeau M, Kuti JL. Early Antibiotic Discontinuation is Not Associated with Increased Mortality in Patients with Clinically Suspected Ventilator Associated Pneumonia (VAP) and Negative Quantitative Bronchoscopy Cultures. Critical Care Medicine, 41: 1656-63, 2013.


Abstracts:


Simonds LM, Coleman CI, and Nailor MD. Implications of culture negative nursing home-acquired pneumonia in antimicrobial de-escalation. ASHP Midyear December 2013.


Blanchette LM, Butler K, Cheema F, Pope S, Nailor MD. Diagnostic predictive value of the Clinical Pulmonary Infection Score (CPIS) versus the Hartford Hospital Two + Two system for


Nolan W, Jacknin G, Nailor MD. Evaluation of educational efforts to healthcare staff to decrease time to N-acetylcysteine administration in suspected acetaminophen overdose. ASHP Midyear December 2012.

Semancik L, Tessier N, Nailor MD. Impact of discharge counseling about cardiology medications on Hospital Consumer Assessment of Healthcare Providers and Systems scores. ASHP Midyear December 2012


Raman K, Nailor MD, Nicolau DP, Aslanzdeh J, Kuti JL. Antibiotic discontinuation is not associated with mortality in suspected ventilator associated pneumonia (VAP) and negative quantitative bronchoscopy cultures. ICAAC September 2012. Accepted for Platform Presentation.


Raman K*, Nailor MD, Nicolau DP, Aslanzdeh J, Kuti JL. Antibiotic discontinuation is not associated with mortality in suspected ventilator associated pneumonia (VAP) and negative quantitative bronchoscopy cultures. Connecticut Infectious Diseases Society Conference May 2012. *Winner of Young Investigator of the Year Award*


Nailor MD, Wilde AM, Schleselman LS. Impact of a pharmacy resident led lecture series on pharmacy student clinical knowledge. ASHP Midyear December 2011.

Krawczynski MA, Ross J, Sobieraj DM, Coleman CI, and Nailor MD. Evaluating low health literacy as a predictor for HIV-1 resistance mutations. ASHP Midyear December 2011.

Nguyen JT and Nailor MD. Analysis of a new pharmacist initiated, nurse implemented vancomycin trough level ordering process. ASHP Midyear December 2011.

Wilde AM, Nailor MD, Nicolau DP, and Kuti JL. Decreased compliance of a ventilator associated pneumonia (VAP) clinical pathway results in inappropriate antibiotic utilization and increasing mortality. IDSA October 2011.

Flatley, EA, Wilde AM, and Nailor MD. Removal of Saccharomyces boulardii from a hospital formulary and the impact on Clostridium difficile-associated diarrhea. ICAAC September 2011.

Wilde AM*, Nailor MD, Nicolau DP, and Kuti JL. Validation of a ventilator associated pneumonia (VAP) clinical pathway using quantitative bronchoalveolar lavage for diagnosis. 29th Connecticut Infectious Diseases Society Conference May 2011. *Winner of Young Investigator of the Year Award*


Wilde AM and Nailor MD. Oral vancomycin for the prevention of Clostridium difficile infection. ASHP Midyear December 2010.

Wilde AM and Nailor MD. Impact of vancomycin dosing maximums in high trough targeting therapy. ASHP Midyear December 2009.


Dickey LG, Nailor MD, Wood T, and Browning LA. Evaluating the use of the clinical pulmonary infection score in patients admitted to the medical intensive care unit with pneumonia. MAD-ID May 2009


Bulik CC, Sobel JD, and Nailor MD. Susceptibility Profile of C. albicans from Vaginal Isoaltes Prior to and Following Fluconazole Introduction. ACCP October 2008


Zhao JJ and Nailor MD. Tigecycline Utilization Review at Detroit Receiving Hospital. ASHP Midyear Meeting. December 2006.

Hall LM, Farber MS, and Nailor MD. Focused Study of Vancomycin Utilization at 72 Hours in a University Hospital. ASHP Midyear Meeting. December 2005. RP 313


Certificate Program Development

American Society of Consultant Pharmacists Certified Geriatric Pharmacist Course Review: 2.5 hours of CE, Pneumonia and Upper Respiratory Tract Infections 2014

American Society of Consultant Pharmacists Certified Geriatric Pharmacist Course Review: 2.5 hours of CE, *Clostridium difficile* Infections 2014