The model analysis demonstrated that the total non-drug medical cost of treatment for ABSSITis ranged from $8,790–$15,968.

Within the total cost of treatment, average per-patient adverse event cost (non-drug resource use) averaged $2,580–$3,042.

- Inpatient and outpatient medical costs, including PICC line placement and complications, are shown in Table 2.
- PICC cost was a total of $974 comprised of PICC line insertion ($786) plus cost of complications ($188) [Figure 2]. Renalophication, PICC replacement, and PICC declotting accounted for roughly one third of the cost of PICC complications.

Clinical and resource use patterns in the decision tree framework were generated from the published literature and validated using multiple rounds of expert review. Various assumptions were considered including whether or not inpatient hospitalization was required and whether PICC line complications were resolved in the inpatient vs. outpatient setting.

Costs were derived from publicly available sources including published literature, standard costing databases, and national average event reimbursement for specific CPT codes.

- Costs of outpatient component of treatment were calculated using outpatient visit physician cost, visit fee, and lab work cost to range the cost to the hypothetical enrollee to reflect the impact of OPAT in children.

The model assumed a clinical success rate of >90% for ABSSITis based on various clinical trials. For the remaining 10%, considered failures, the model assumed that adverse events requiring a week of treatment (<1%) and actual treatment failure (1%) occurred at a frequency of one in 100 patients.

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