

SELECTED PROCEDURES ONLY

Prophylaxis **not** required for:

- Lymph node biopsy
- Clean skin and soft tissue surgery
- Uncomplicated skin abscess incision and drainage
- Hernia repair without prosthetic material
- Uncomplicated cystoscopy/ureteroscopy
- Tonsillectomy, adenoidectomy
- Clean non-extensive head and neck surgery
- Diagnostic endoscopic procedures
- ERCP · EUS-FNA
- Closed fracture reduction without fixation
- Cardiac catheterisation
- CVC insertion (unless port or immunocompromised)

START CORRECT ANTIBIOTIC AT OPTIMAL TIME

If prophylaxis required:

Use Cefazolin 30 mg/kg (max 2 g) IV

15-60 min before incision (inject over 5 min)

If intra-abdominal, pelvic, deep wound debridement, ischaemic limb, risk of bowel lumen entry, open fracture:

Add Metronidazole 12.5 mg/kg (500 mg) IV

Start 30-120 min before incision (infuse over 20 min)

If known (or risk of) MRSA colonisation or infection; or if reoperation (prosthetic cardiac valve, joint, vascular)

Add Vancomycin 15 mg/kg (750 mg) IV

Start infusion 30-60 min before incision (rate 10 mg/min)

If urological prosthesis/complicated procedure:

Use Gentamicin 2 mg/kg IV

Start infusion 15-60 min before procedure; (5 mg/kg if procedure >6h)

Card expires Feb 2026. Prepared by nigel.curtis@rch.org.au on behalf of RCH Antimicrobial Stewardship Committee. Based on Australian Therapeutic Guidelines – Antibiotic v15.

SEVERE BETA LACTAM ALLERGY

Previous anaphylactic symptoms

For **most procedures**, REPLACE cefazolin with:

Vancomycin 15 mg/kg (750 mg) IV

Start infusion 30-60 min before incision (rate 10 mg/min)

For **cardiac & vascular surgery**, USE:

Vancomycin 15 mg/kg (750 mg) IV

Start infusion 30-60 min before incision (rate 10 mg/min)

& Gentamicin 5 mg/kg (400 mg) IV

Start infusion 15-60 min before procedure

For **ENT surgery**, USE:

Clindamycin 15 mg/kg (600 mg) IV

15-60 min before incision

For **upper & lower GI surgery**, USE:

Vancomycin 15 mg/kg (750 mg) IV

Start infusion 30-60 min before incision (rate 10 mg/min)

& Gentamicin 2 mg/kg IV

Start infusion 15-60 min before procedure; (5 mg/kg if procedure >6h)

& Metronidazole 12.5 mg/kg (500 mg) IV

Start 30-120 min before incision (infuse over 20 min)

SINGLE DOSE

Single pre-op dose sufficient for most procedures

May need intra-op antibiotics if prolonged or excessive blood loss during surgery: every 4h (cefazolin), 6h (clindamycin) or 12h (vancomycin, metronidazole)

STOP

Most procedures do not need post-op antibiotics

- Post-op antibiotics increase resistance and *C. difficile* risk
- **Only** cardiac & orthognathic surgery may need max 24h
- Catheters or drains *in situ* are **not** a justification to extend