

Surgical Antimicrobial Prophylaxis Guidelines: Stanford Health Care

Classification of operative wounds

CLEAN

- Elective, not emergency, non-traumatic, primarily closed;
- No acute inflammation; no break in technique;
- Respiratory, gastrointestinal, biliary and genitourinary tracts not entered

CLEAN-CONTAMINATED

- Urgent or emergency case that is otherwise clean;
- Elective opening of respiratory, gastrointestinal, biliary or genitourinary tract with minimal spillage (e.g., appendectomy)
- Not encountering infected urine or bile; minor technique break

CONTAMINATEDZ

- Nonpurulent inflammation;
- Gross spillage from gastrointestinal tract;
- Entry into biliary or genitourinary tract in the presence of infected bile or urine;
- Major break in technique; penetrating trauma < 4 hours old;
- Chronic open wounds to be grafted or covered

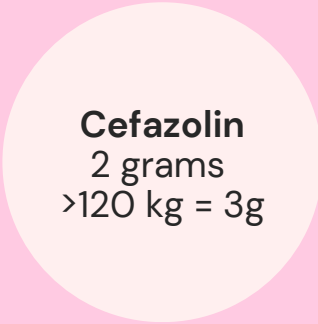
DIRTY

- Purulent inflammation(e.g., abscess);
- Preoperative perforation of respiratory, gastrointestinal, biliary or genitourinary tract;
- Penetrating trauma > 4 hours old

Preferred Empiric Agent by Surgical Type

Surgical Type	Preferred Agent	Beta-lactam allergy
Cardiac Surgery/ Vascular/Thoracic	Cefazolin	Vancomycin
Cardiac Surgery with prosthetic material	Cefazolin + Vancomycin	Vancomycin
Cardiac device insertion (e.g., pacemaker implantation)	Cefazolin	Vancomycin
Gastroduodenal (e.g. ulcer resection, carcinoma resection, perforation repair, gastric outlet stricture repair, & bariatric surgery	Cefazolin	Levofloxacin
Biliary Tract	Cefazolin + Metronidazole	Metronidazole + Levofloxacin
Hepatopancreatobiliary	Piperacillin/Tazobactam or targeted based on bile culture	Levofloxacin + Metronidazole
Colorectal, appendectomy	Cefazolin + Metronidazole	Metronidazole + Levofloxacin
Other general surgery (e.g. hernia repair, breast, spleen)	Cefazolin	Vancomycin
Cesarean delivery	Cefazolin	Clindamycin + Gentamicin
Gynecological (eg hysterectomy)	Cefazolin + Metronidazole	Metronidazole + Gentamicin
Neurosurgery, Orthopaedics, Plastic Surgery	Cefazolin	Vancomycin
Liver Transplant	PIPTAZ	Vancomycin + Aztreonam

DOSING OF ANTIBIOTICS



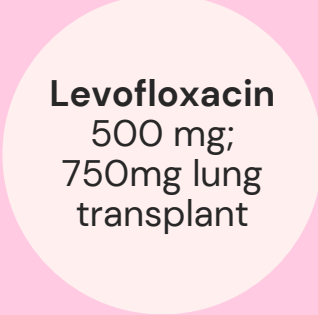
Cefazolin
2 grams
>120 kg = 3g



Clindamycin
900 mg



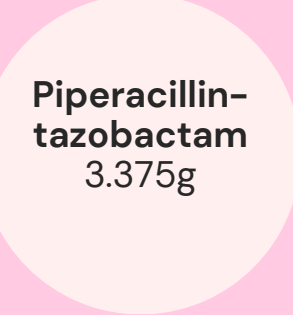
Vancomycin
<80 kg = 1g
80 –99 = 1.25g
100 –120 =1.5g
>120 kg= 2g



Levofloxacin
500 mg;
750mg lung
transplant

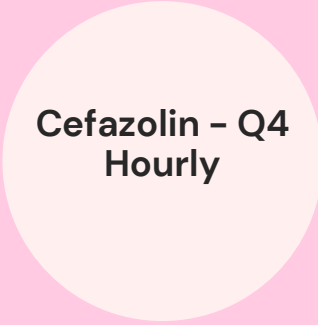


Metronidazole
500 mg



**Piperacillin-
tazobactam**
3.375g

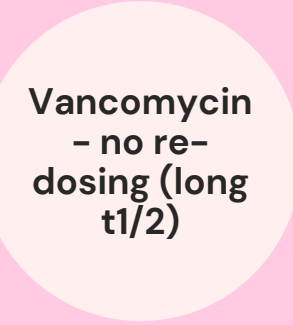
RE-DOSING OF ANTIBIOTICS



Cefazolin – Q4
Hourly



Clindamycin
– Q8 Hourly



Vancomycin
– no re-
dosing (long
t1/2)

POST-OP DOSING



Cefazolin
2g q8h up to 2 doses



Clindamycin
900mg q8h up to 2 doses



Vancomycin
1g q12h up to 1 dose



Ampicillin-sulbactam
3g q6h up to 3 doses



Aztreonam
2g q8h up to 2 doses



Ciprofloxacin
400 mg q12h up to 1 dose



Levofloxacin
No post op-doses needed



Metronidazole
500mg q8h up to 2 doses