

Obstetric and Gynaecological Procedures (Prophylaxis)

HYSTERECTOMY / CAESAREAN SECTION

1st choice	<u>Co-amoxiclav</u> 1.2 g IV single dose on induction
Penicillin allergy	<u>Clindamycin</u> 600 mg IV single dose at induction (Maximum infusion rate: 30mg/minute. Try to complete infusion before starting procedure)

TERMINATION OF PREGNANCY

Uncomplicated	No prophylactic antibiotics
If found to be positive for Chlamydia at time of procedure	<u>Doxycycline</u> 100mg PO 12 hourly for 7 days post-procedure
If known to have Chlamydia or pelvic inflammatory disease (PID) prior to procedure	<u>Doxycycline</u> 100mg PO 12 hourly for 7 days pre-procedure

EVACUATION OF RETAINED PRODUCTS OF CONCEPTION (ERPC)

1st choice	<u>Co-amoxiclav</u> 1.2 g IV single dose before procedure
Penicillin allergy	<u>Clarithromycin</u> 500 mg IV single dose plus <u>Metronidazole</u> 500 mg IV single dose before procedure OR <u>Clindamycin</u> * 600 mg IV single dose before procedure (*Maximum infusion rate: 30mg/minute. Try to complete infusion before starting procedure)

IN SACROCOLPOPEXY – IN VIEW OF MESH IMPLANTATION

On induction	<u>Co-amoxiclav</u> 1.2 g IV single dose plus <u>Gentamicin</u> 1.5mg/kg IV single dose
Penicillin allergy	<u>Clindamycin</u> 600 mg IV at induction (Maximum infusion rate: 30mg/minute. Try to complete infusion before starting procedure)
If high risk of mesh infection post operative	Continue with <u>Co-amoxiclav</u> 625mg PO 8 hourly OR <u>Clindamycin</u> 450mg PO 6 hourly for up to 5 days