## **2016** Intraoperative Antibiotic Re-administration Guidelines

Antimicrobial	Initial Pre-Op Dose (IV)	Half life (hr)	Intra-op Dose (IV)	Re-dosing Interval	Max number of intra-op re-doses	Total Doses	Re-dosing in Renal Failure (ESRD)
Ampicillin / Sulbactam	1.5 g	1-1.3	1.5 g	2 Hours	3	4	Unnecessary
	3 g		3 g				
Cefazolin	Less than 120 kg: 2 g	1.5-2.5	2 g	4 Hours	3	4	Unnecessary
	Greater than 120 kg: 3 g		3 g				
Cefepime	2 g	2	2 g	6 Hours	2	3	Unnecessary
Cefoxitin	Less than 120 kg: 2 g	0.75-1	2 g	2 Hours	3	4	Unnecessary
	Greater than 120 kg: 3 g		3 g				
Ceftriaxone	Less than 120 kg: 1 g	5-9	Unnecessary	Unnecessary	Unnecessary	Unnecessary	Unnecessary
	Greater than 120 kg: 2 g						
Ciprofloxacin	400 mg	3-5	400 mg	8 Hours	2	3	Unnecessary
Clindamycin	600 mg	2-4	600 mg	4 Hours	2	3	4 Hours
	900 mg		900 mg				
Ertapenem	1 g	4	1 g	Unnecessary	Unnecessary	Unnecessary	Unnecessary
Fluconazole	400 mg	20-50	400 mg	Unnecessary	Unnecessary	Unnecessary	Unnecessary
Gentamicin	3 mg/kg	1.5-3	3 mg/kg	6 Hours	1	2	Unnecessary
Levofloxacin	500 mg	6-8	Unnecessary	Unnecessary	Unnecessary	Unnecessary	Unnecessary
Metronidazole	500 mg	8	500 mg	8 Hours	2	3	8 Hours
Piperacillin/Tazobactam*	3.375 g	0.7-1.2	3.375 g	2 Hours	1	2	8 Hours
Vancomycin	Less than 120 kg: 1 g	5-11	1 g	12 Hours	1	2	Unnecessary
	Greater than 120 kg: 1.5 g		1.5 g				

- Pre-operative antibiotic:
  - o Goal: First dose of antibiotics to be give within 60 min prior to incision or within 120 minutes for vancomycin and fluoroquinolones. They should NOT start less than 20 minutes prior to incision. Finish infusion by incision time
- Importance of intra-operative re-dosing:
  - o Needed to ensure adequate serum concentrations in lengthy procedures in patients with normal renal function
  - Re-dosing is recommended at an interval of approximately two times the half live of the agent in patients with normal renal function and in the setting of excessive blood loss (greater than 1500mL)
- Piperacillin/Tazobactam:
  - o Discouraged for procedures greater than 2 hours due to potential for toxicity with frequent re-dosing

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