

PAEDIATRIC HOSPITAL LEVEL ESSENTIAL MEDICINES LIST
CHAPTER 11: SURGICAL PROPHYLAXIS
NEMLC 11 JULY 2019

A: PREVIOUS RECOMMENDATIONS

MEDICINE AMENDMENTS

SECTION	MEDICINE	ADDED/DELETED/NOT ADDED
General	Cefazolin	Dose amended
Lower limb Surgery	Metronidazole	Deleted
Beta lactam Allergies	Clindamycin	Added
	Gentamicin	Added

B: AMENDMENTS FOLLOWING COMMENT

The only external comment that was received was editorial. All editorial amendments were accepted, and the chapter was updated.

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Principles of surgical prophylaxis

An additional principle was added as follows¹:

- » If a patient is receiving antimicrobials for a remote infection prior to surgery, antibiotic prophylaxis should still be given in order to ensure adequate serum and tissue levels with activity against the pathogens during the surgery. If the agent being used for treatment is appropriate for surgical prophylaxis, administering an extra dose within 60 minutes before surgical incision is sufficient.

Antibiotic Prophylaxis

Cefazolin

The Paediatric ERC recommended that the cefazolin dose be amended in line with the American Journal of Health Systems Pharmacy (ASHP) Clinical Practice Guidelines for antimicrobial prophylaxis in surgery, 2013.¹

The dose was amended as follows:

- » Cefazolin, IV, 25-30 mg/kg (maximum dose ~~1000~~ 2000 mg).

Level of Evidence: III Guidelines

Lower limb surgery – antibiotic prophylaxis

Metronidazole: Deleted

The Paediatric ERC recommended the removal of metronidazole in addition to cefazolin for lower limb surgery. Metronidazole or anaerobe cover is not specifically recommended by the ASHP Guidelines for antimicrobial prophylaxis in surgery (2013), or in the Australian Government Guideline (2017).² It only indicated high lower limb amputation or where limb is ischaemic.

¹ Bratzler DW, et. al. Clinical Practice Guidelines for antimicrobial prophylaxis in surgery. Am J Health-Syst Pharm. 2013; 70:195-283.

² Government of South Australia. Surgical Antimicrobial Prophylaxis Clinical Guideline. 2017, version 2.0.

Beta lactam Allergies

The Paediatric ERC recommended the addition of recommendations for patients with a history of anaphylaxis to beta lactam antimicrobials.

The following section was added:

Beta lactam Allergies:

Avoid beta-lactam antimicrobials in patients with a history of anaphylaxis, urticarial or angioedema after exposure to one of these agents.

In these cases:

- Clindamycin, IV 6 mg/kg
(single dose unless procedure is > 4 hours)

ADD

- Gentamicin , IV 6 mg/kg for the following procedures:
 - » Oropharyngeal mucosal,
 - » Biliary
 - » Nephro-uological
 - » Colorectal & appendix
 - » Pelvic

Clindamycin: Added

Gentamicin: Added

This recommendation was aligned with the Adult Hospital Level Standard Treatment Guidelines (STGs) and Essential Medicine List recommendation. The recommendations are aligned with those already recommended in the Paediatric STGs.