

ANMC Surgical Prophylaxis: Antimicrobial Dosing and Intraoperative Redosing

ANMC Preferred Antibiotics

Surgical Procedure	Recommendation	Anaphylaxis to penicillin or cephalosporin allergy
Cardiac or Vascular	Cefazolin	Vancomycin or Clindamycin
Hip/Knee Arthroplasty	Cefazolin	Vancomycin or Clindamycin
Colon	Cefazolin + Metronidazole	(Ciprofloxacin or Gentamicin) + (Clindamycin or Metronidazole)
Hysterectomy	Cefazolin	(Ciprofloxacin or Gentamicin) + (Clindamycin or Metronidazole)

Administer all prophylactic antibiotics within 1 hour prior to surgical incision

EXCEPT: Vancomycin and Fluoroquinolone infusions should be initiated 15 minutes to 2 hours prior to surgical incision

Antimicrobial	Recommended Dose		Redosing interval after initiation of preoperative dose
	Adults	Pediatrics	
Aztreonam	2 g	30 mg/kg	4 hours
Cefazolin	2 g, 3 g for wt ≥ 120 kg (with metronidazole for colorectal procedures)	30 mg/kg	4 hours
Ceftriaxone	2 g	50-75 mg/kg	NA due to long t _{1/2}
Ciprofloxacin	400 mg	10 mg/kg	NA due to long t _{1/2}
Clindamycin	900 mg	10 mg/kg	6 hours
Gentamicin*	5 mg/kg	2.5 mg/kg	NA due to long t _{1/2}
Levofloxacin	500 mg	10 mg/kg	NA due to long t _{1/2}
Metronidazole	500-1000 mg	15 mg/kg (Neonates wt < 1200 g use 7.5 mg/kg x 1 dose)	NA due to long t _{1/2}
Piperacillin-tazobactam	3.375 g	2-9 mo: 80 mg/kg of piperacillin > 9 mo and ≤ 40 kg: 100 mg/kg of piperacillin	2 hours
Vancomycin*	15 mg/kg	15 mg/kg	NA due to long t _{1/2}

* For BMI > 30 kg/m², use adjusted body weight to dose.
Adjusted body weight = [(actual body weight – ideal body weight) x 0.4] + ideal body weight