

Urology Procedures (Prophylaxis)

Mid stream urine culture must be checked before surgery and a peri-procedure sample requested. It is preferable that prophylaxis should **not** be administered beyond the day of the procedure.

MINOR INTERVENTIONS UNDER LOCAL ANAESTHETIC (e.g. Urodynamics, catheterisation, when presence of infection known or high risk)

1st choice Gentamicin 1.5 mg/kg IV as a single dose at induction

TRANSRECTAL PROSTATIC BIOPSY

1st choice Gentamicin 1.5 mg/kg IV single dose
plus Metronidazole 1g suppository 1 hour before procedure

Alternative Ciprofloxacin 500mg PO 1-2 hours before the procedure **plus**
Metronidazole 1g suppository 1 hour before procedure

PROSTHETIC IMPLANTS, RECONSTRUCTIVE SURGERY INVOLVING PENILE TISSUE, URETHROPLASTY, BLADDER RECONSTRUCTION

1st choice Cefuroxime 1.5g IV at induction, then 750mg IV
8 hourly for 2 doses

OR

Co-amoxiclav 1.2g at induction, then 1.2g IV
8 hourly for 2 doses

Penicillin allergy Ciprofloxacin 500mg PO 1-2 hours before the procedure,
then 500mg PO 12 hourly for 2 doses

If intestinal material is to be used **Add** Metronidazole 500mg IV, then 500mg IV (or 400mg
PO) 8 hourly for 2 doses.

There is no need to add Metronidazole to Co-amoxiclav
which has anti-anaerobic activity.
(Try to complete infusion before starting procedure)

INGUINO-SCROTAL SURGERY

- 1st choice** Cefuroxime 1.5 g IV single dose at induction
OR
Flucloxacillin 1g IV single dose at induction
- Penicillin allergic** Clarithromycin 500 mg IV single dose at induction
(Try to complete infusion before starting procedure)

ENDOSCOPIC UROLOGY (e.g. Transurethral resection of prostate - TURP,

Percutaneous nephro-lithotripsy - PCNL)

Nephrolithotomy may require longer courses of prophylaxis if significant bacteraemia is likely following the procedure.

- 1st choice** Gentamicin 1.5 mg/kg IV as a single dose before procedure.
- If infective stones removed** Continue Gentamicin 80mg every 8 hours for 48 hours or until culture results available.
(Refer to Gentamicin dosing guideline for advice on levels).

FLEXIBLE CYSTOSCOPY

Refer to flexible cystoscopy guidelines.