NHS
Greater Glasgow and Clyde

CLINICAL GUIDELINE

Antibiotic Prophylaxis in Gynaecological Procedures

A guideline is intended to assist healthcare professionals in the choice of disease-specific treatments.

Clinical judgement should be exercised on the applicability of any guideline, influenced by individual patient characteristics. Clinicians should be mindful of the potential for harmful polypharmacy and increased susceptibility to adverse drug reactions in patients with multiple morbidities or frailty.

If, after discussion with the patient or carer, there are good reasons for not following a guideline, it is good practice to record these and communicate them to others involved in the care of the patient.

Version Number:	7
Does this version include changes to clinical advice:	Yes
Date Approved:	23rd February 2023
Date of Next Review:	30th November 2025
Lead Author:	Ysobel Gourlay
Approval Group:	Antimicrobial Utilisation Committee

Important Note:

The Intranet version of this document is the only version that is maintained.
Any printed copies should therefore be viewed as 'Uncontrolled' and as such, may not necessarily contain the latest updates and amendments.

NHS Greater Glasgow and Clyde recommendations for antibiotic prophylaxis in Gynaecological Procedures

See GGC Recommendations for Antibiotic Prophylaxis in Surgery /Procedures - for information in antibiotic **timing, re-dosing** for long operations and **gentamicin dosing**. See antibiotic-prophylaxis-in-surgery.pdf (nhsggc.org.uk)

Procedure	Recommended antibiotic regimen	Comments
Laparotomy for known malignancy (Local & Oncology Centre Surgery) ** For women undergoing laparotomy where risk of bowel entry is anticipated, consider as an alternative	**Co-amoxiclav** IV 1.2g or *in penicillin allergy* **Clindamycin** IV 600 mg **And** **Gentamicin*** IV **Amoxicillin** IV 1g And **Metronidazole** IV 500mg And **Gentamicin** * IV If true penicillin / beta-lactam allergy or high MRSA risk, replace **Amoxicillin** IV 1g with **Teicoplanin** IV 400mg	**For women undergoing laparotomy where **risk of bowel entry is anticipated,** the following pre-op regimen may be administered the **day before** surgery**:** **Metronidazole** PO 400mg at 3pm, 4pm 10pm **And (if available)** **Neomycin** PO 1g at 3pm, 4pm, 10pm **And** **Klean- Prep**® 4 sachets to start at 10 am. Keep drinking until complete. Contact microbiology for advice if concerns regarding infection rates.
Hysterectomy [α] (abdominal, vaginal) Laparotomy Pelvic floor repair (non-mesh) Operative laparoscopy- treatment of endometriosis, adnexal surgery and subtotal / total hysterectomy Endometrial resection	**Co-amoxiclav** IV 1.2g or *in penicillin allergy* **Clindamycin** IV 600 mg **And** **Gentamicin*** IV	[α] In female patients transitioning to male undergoing hysterectomy who require **Gentamicin**, use female **Gentamicin** dose based on height
Cystoscopy	Not recommended	
Abdominal prolapse surgery using mesh Colposuspension	**Co-amoxiclav** IV 1.2 g or *in penicillin allergy* **Clindamycin** IV 600 mg **And** **Gentamicin*** IV	**8 hours later – give second dose of Co-amoxiclav IV 1.2g** **Or** **Clindamycin IV 600mg**

Autologous fascial sling	**Co-Amoxiclav** IV 1.2 g or *in penicillin allergy* **Clindamycin** IV 600 mg **And** **Gentamicin*** IV	Consider 8 hours later - further dose of **Co-amoxiclav** IV 1.2g Or **Clindamycin** IV 600mg
Retropubic tape	**Co-Amoxiclav** IV 1.2 g or *in penicillin allergy* **Clindamycin** IV 600 mg **And** **Gentamicin*** IV	Post-operative prophylaxis not recommended.
Surgical termination of pregnancy/ surgical evacuation of uterus	**Metronidazole** PR 1 g (intra-operative) **And** **Azithromycin** PO 1 g (Immediately post-operative)	If Metronidizole PR unavailable, give **Metronidazole** PO 800mg 2 hours pre-surgery
Hysteroscopy Endometrial ablation Diagnostic laparoscopy (+/- hydrotubation) Laparoscopic sterilisation	Not recommended	
Bartholins Cyst Word catheter insertion under Local anaesthetic Formal marsupialisation / Incision and Drainage	No prophylaxis required **Co-amoxiclav** IV 1.2g Or **Clindamycin** IV 900mg	