## Waterford: Antimicrobial Guidelines - Antimicrobial Guideline: Urogenital

## **Urogenital**

Type of surgery		Prophylactic Antibiotic	Penicillin allergy (NOT	Severe hypersensitivity reaction/anaphylaxis to	
	required? 4,10	of choice	severe hypersensitivity		
			reaction/anaphylaxis)	penicillins	
ransurethral resection	Recommended	Gentamicin +	Gentamicin	Gentamicin	Single dose
of prostate (TURP)					
		Amoxicillin		O:	0.4.1
Transrectal ultrasound	Recommended	Ciprofloxacin ±	Ciprofloxacin ±	'	24 hours
(TRUS)-guided prostate		Gentamicin	Gentamicin	Gentamicin	
biopsy					
(Please see Appendix 4					
for note regarding					
Multi-drug Resistant					
Organisms (MDRO))					
Transperineal prostate	*May be considered in	Co-amoxiclav	Cefuroxime	Gentamicin	Single dose
biopsy	high risk patients				-
Cystourethroscopy with	Recommended	Gentamicin	Gentamicin	Gentamicin	Single dose
manipulation (includes					-
transuretheral resection					
of bladder					
tumour-TURBT, any					
biopsy, resection,					
fulguration, foreign body					
removal, urethral					
dilatation, stent					
placement/removal,					
stone removal)					
Radical cystectomy	Recommended	Co-amoxiclav±	Cefuroxime±	Gentamicin +	Single dose
cystectomy and urinary					Ū
diversion),		Gentamicin	Metronidazole (if bowel	Vancomycin ±	
,,			involvement)	Matropidonalo (if housel	
Nephrectomy or				Metronidazole (if bowel	
nephroureterectomy				involvement)	
Radical prostatectomy					
Percutaneous	Recommended	Gentamicin	Gentamicin	Gentamicin	Single dose
nephrolithotomy (PCNL)					Sg.0 4000
Robotic surgery	Recommended	Co-amoxiclav	Cefuroxime	Gentamicin	Single dose
Cystoscopy	*May be considered in	Gentamicin	Gentamicin	Gentamicin	Single dose
C, 5.5000p,	high-risk patients				Sg.0 4000
Urethral catheterisation	g non panomo				
Circumcision, hydrocele,	Not recommended				
urodynamics,					
Extracorporeal shock					
wave lithotripsy (ESWL)					

\*Patients at increased risk of infection include those with pre-existing UTI, immunodeficiency, advanced age, anatomical abnormality of the renal tract and on immunosuppressive therapy.

Waterford:	Antimicrobia	Guidelines -	Antimicrobial	Guideline - La	ast Updated: Aug.	16, 2024,	12:54 p.m., printed:	Sept. 21, 2024, 1:37 a	ı.m.
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Consider addition of Vancomycin if MRSA high risk/known colonisation

Tailor prophylaxis based on susceptibility report of pre-operative urine culture.