## **Prophylactic Antibiotic Regimen Selection for Surgery**

<b>Surgical Procedure</b>	Approved Antibiotics		
CABG, Other Cardiac	Cefazolin, Cefuroxime, Table 3.1		
or	or Vancomycin** Table 3.8		
Vascular	If β-lactam allergy: Vancomycin* Table 3.8 or Clindamycin* Table 3.9		
Hip/Knee	Cefazolin or Cefuroxime Table 3.2		
Arthroplasty	or Vancomycin** Table 3.8		
	If β-lactam allergy: Vancomycin* Table 3.8 or Clindamycin* Table 3.9		
Colon			
	Cefotetan, Cefoxitin, Ampicillin/Sulbactam Table 3.5, or		
	Ertapenem† Table 3.6b		
	OR		
	Cefazolin or Cefuroxime Table 3.2 + Metronidazole Table 3.6a		
	1001 4 11		
	If β-lactam allergy:		
	Clindamycin Table 3.9 + Aminoglycoside Table 2.11, or		
	Clindamycin Table 3.9 + Quinolone Table 3.12, or		
	Clindamycin Table 3.9 + Aztreonam Table 2.7		
	OR Metropiderale T. H. 2 ( with Amine alwaeside T. H. 2 H. ar		
	Metronidazole Table 3.6a with Aminoglycoside Table 2.11, or		
Hygtomootomy	Metronidazole Table 3.6a + Quinolone Table 3.12 Cefotetan, Cefazolin, Cefoxitin, Cefuroxime, or		
Hysterectomy			
	Ampicillin/Sulbactam Table 3.7		
	If β-lactam allergy:		
	Clindamycin Table 3.9 <b>OR</b>		
	Metronidazole Table 3.6a		
Special	*For cardiac, orthopedic, and vascular surgery, if the patient is		
Considerations	allergic to β-lactam antibiotics, Vancomycin or Clindamycin are		
	acceptable substitutes.		
	**Vancomycin is acceptable with a physician/APN/PA		
	documented justification for its use (see data element <i>Vancomycin</i> )		
	† A single dose of ertapenem is recommended for colon		
	procedures.		
	procedures.		

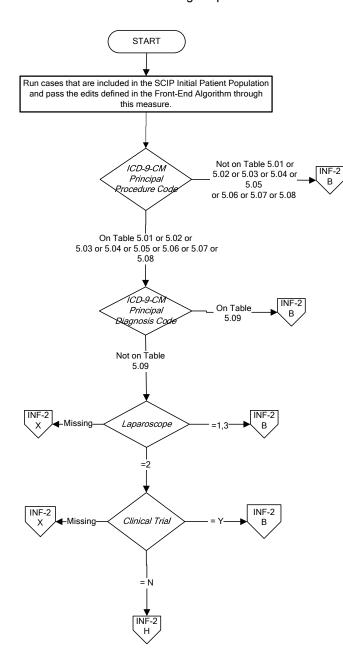
## SCIP-INF-2: Prophylactic Antibiotic Selection for Surgical Patients

Numerator: Number of surgical patients who received prophylactic antibiotics recommended for

their specific surgical procedure.

Denominator: All selected surgical patients with no evidence of prior infection.

Variable Key: Antibiotic Days I Antibiotic Timing I Antibiotic Days II Antibiotic Timing II Surgery Days Abxday Flag



Stratification Table:				
Set#	Stratified By	*Principal Proc	edure Code	
		(Allowa	ible Value)	
SCIP-INF2	2a Overa	ıll Rate	**	
SCIP-INF2	2b CABG	à	Table 5.01	
SCIP-INF2	2c Other	Cardiac Surgery	Table 5.02	
SCIP-INF2	2d Hip A	rthroplasty	Table 5.04	
SCIP-INF2	2e Knee	Arthroplasty	Table 5.05	
SCIP-INF2	2f Colon Sur	gery	Table 5.03	
SCIP-INF2	2g Hyste	rectomy	Table 5.06 Or	
5.07				
SCIP-INF2	2h Vascu	ılar Surgery	Table 5.08	

SCIP-INF2h Vascular Surgery Table 5.0

\* This refers to the data element \*ICD-9-CM Principal Procedure Code\*. Each case will be stratified according to the principal procedure code, after the Category Assignments are completed and the overall rate is calculated.

and the overall rate is calculated.

\*\* No allowable value exists for the overall rate. It includes all procedures on Tables 5.01 to 5.08.

