

Letterkenny University Hospital - LUH Antimicrobial Prescribing Policy/Guidelines: Classification of Surgical Procedures

Classification of Surgical Procedures		
Clean	Clean-contaminated	Contaminated/Dirty
<p>No breach of respiratory, alimentary or genito-urinary tracts</p> <p>Non-traumatic</p> <p>No inflammation</p> <p>No break in aseptic technique</p>	<p>Non-traumatic but with break in aseptic technique or breach of respiratory, alimentary or genito-urinary tract</p> <p>No significant spillage</p>	<p>Contaminated: Major break in aseptic technique; acute inflammation (without pus); operations where there is visible contamination of wound e.g. gross spillage from a hollow viscus during surgery or fresh (less than 4 hours) traumatic wound from relatively clean source.</p> <p>Dirty: operations in the presence of pus e.g. where there is a previously perforated hollow viscus or compound/open injuries that are old (more than 4 hours) or from a dirty source.</p>
<p>Prophylaxis NOT usually recommended UNLESS clinical setting indicates an increased infection risk E.g. lower-extremity vascular procedures, or where infection may have devastating consequences e.g. orthopaedic implant surgery or placement of other prosthetic devices) , or if the patient is immunocompromised e.g. neutropenic, receiving immunosuppressive agents, malnourished.</p>	<p>Prophylaxis indicated (see individual speciality)</p>	<p>Prophylaxis indicated (see individual speciality).</p> <p>Treatment course may be required (usually 5 to 7 days - duration will depend on clinical response). Discuss with Microbiology consultant if necessary.</p>