

Pediatric Orthopaedic Surgery- Spine Antibiotic Protocol

	CEFAZOLIN (30 mg/kg/dose q 8h) (Max 2 grams/dose) <i>Doses calculated to be more than 1 gram are NOT contraindicated in this patient population</i>	TOBRAMYCIN (2.5 mg/kg/dose q 8h) (Max 200 mg/dose)
INTRA-OP	1 st dose given within 60 min of incision	1 st dose given within 60 min of incision
	Repeat intra-op dose q 4h (if prolonged procedure)	Repeat intra-op dose q 8 h (if prolonged procedure)
	Last intra-op dose: _____mg @ _____ on ___/___	Last intra-op dose: _____mg @ _____ on ___/___
POST-OP	1 st post-op dose: _____mg @ _____ on ___/___	1 st post-op dose: _____mg @ _____ on ___/___
	Last dose at or before _____ on ___/___ (D/C within 24h of surgery end time)	Last dose at or before _____ on ___/___ (D/C within 24h of surgery end time)

ONLY IF PATIENT IS Penicillin/Beta-Lactam allergic or colonized with MRSA use:

VANCOMYCIN 15 mg/kg/dose (max 1 gram), given within 120 min of incision, infuse over 60 min. Give same dose 8 hours after the first dose if prolonged procedure. Give same dose 8 hours after last intra-operative dose. D/C antibiotics within 24 hours of surgery end time.

Please Note:

POD #0- SPECIFIC SPINE ORDERS

- **STAT EKG** on all spine patients to evaluate for prolonged QTC interval for Methadone use.
- **PT/OT** Activity as tolerated, NO RESTRICTIONS unless specified by Attending/Ortho team.
- **BOWEL REGIMEN-** Start Colace and Senna

POD #1- SPECIFIC SPINE ORDERS

- **LABS-** Stat CBC on POD #1
- **FOLEY-** may consider d/c on POD #1 if patient is mobile
- **TORADOL-** can start @ 24 hours post-op unless allergic or specified by Orthopaedics.

THIS IS A WORKSHEET- NOT TO BECOME PART OF THE PATIENT CHART