

ENDOCARDITIS PROPHYLAXIS FOR OB/GYN PATIENTS

High Risk for Infectious Endocarditis (antibiotic prophylaxis recommended):

- Prosthetic heart valve
- Previous bacterial endocarditis
- Complex cyanotic congenital heart disease (single ventricle, transposition of great vessels, Tetralogy of Fallot)
- Surgically constructed pulmonary shunt/conduits

Prophylaxis NOT indicated for:

- Bicuspid aortic valve
- Acquired aortic or mitral valve disease (including mitral valve prolapse with regurgitation and those who have undergone prior valve repair)
- Hypertrophic cardiomyopathy with latent or resting obstruction

OB/GYN Procedures for which prophylaxis indicated in high risk patients:

- All dental procedures involving gums, teeth or perforation of oral mucosa
- Surgery on infected tissue (skin/musculoskeletal)
- GU procedures with UTI/enterococcus colonization

OB/GYN Procedures that DO NOT require antibiotic prophylaxis:

(may need antibiotics for other reasons)

- Vaginal delivery
- Vaginal hysterectomy
- C-section

Recommended Antibiotic Prophylaxis Regimen:

Give 30-60 minutes prior to procedure

- Amoxicillin 2 g PO or
- Ampicillin 2 g IM/IV

For Penicillin allergic patients:

- Cephalexin 2g PO or
- Clindamycin 600 mg PO or
- Azithromycin 500 mg PO or
- Clarithromycin 500 mg PO or
- Cefazolin 1 g IM/IV or
- Ceftriaxone 1 g IM/IV or
- Clindamycin 600 mg IM/IV

American Heart Association 2007 Guidelines