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| **S No**  **MEDICAL RESEARCH FOUNDATION**  **ANTIBIOTIC POLICY FOR POSTERIOR SEGMENT SURGERIES** | **Procedure** | **Preoperative Topical Antibiotic** | **Preoperative Systemic Antibiotic** | **Post-operative Topical** | **Post - operative Systemic Antibiotics** | **Intravitreal**  **Antibiotics** |
| 1 | Intravitreal Anti-VEGF/ Steroid Injections  (Routine) | Nil | Nil | Nil | Nil | Nil |
| 2 | Intravitreal Anti-VEGF/ Steroid Injections  (**High Risk**) \*  -One Eyed  -Povidone Iodine Allergy  - Poor Hygiene | Ciprofloxacin Eye drops (0.3%) 6 times/day for 1 day | Nil | Ciprofloxacin eye drops (0.3%) 6 times/day for 3 days | Nil | Nil |
| 3 | VR Surgeries (Routine) | Nil | Nil | Nil | Nil | Nil |
| 4 | VR Surgeries (**High Risk**) #  -One Eyed  -Multiple VR surgeries  - Post trauma (open globe < 1month)  - Extensive surgical manipulation  -Combined surgeries (PK-VR, Glaucoma-VR etc.,)  - Surgeons discretion based on hygiene of patient | Ciprofloxacin Eye drops (0.3%) 6 times/day for 1 day | Tab Ciprofloxacin 750 mg 24 hr. and 12 hr. ( 2 doses) before surgery  Pediatric Patients (<18 years)  Inj Cefotaxime 50 mg/Kg body weight IV | Ciprofloxacin Eye drops (0.3%) 6 times/day for 1 week | Nil | Nil |
| 5 | Endophthalmitis | Moxifloxacin(0.5%) Eye Drops 1-2 hourly for Gram positive and Negative cover  Till Culture and sensitivity is known and then change based on sensitivity pattern | Inj I/VCefotaxime  To cover Gram Positive  Inj I/V Garamicin | Moxifloxacin(0.5%) Eye Drops 1-2 hourly  Till Culture and sensitivity is known and then change based on antibiogram | Inj I/VCefotaxime 1 gm every 12 hrs for 5-7 days or  To cover Gram Positive till antibiogram is ready to dictate further treatment  Inj I/V Gentamycin 1-1.5 mg/ Kg body weight every 8 hours for 5-7 days  Monitor renal, auditory and vestibular symptoms if treatment exceeds 10 days  To cover Gm negative bacteria  Antibiogram may dictate further change | Vancomycin 1mg/0.1 ml  for Gram positive cover  Ceftazidime 2.25mg/0.1 ml  for gram negative coverage  Culture and sensitivity may further guide change of antibiotics |