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Guideline Antibiotic prophylaxis for Nephrostomy insertion

SharePoint location	Clinical Policies and Guidelines
SharePoint Index Directory	General Policies and Guidelines
Sub Area	Urology / Radiology
Key words <i>(for search purposes)</i>	Antibiotic; Prophylaxis; Nephrostomy
Central Index No	
Endorsing Body	Department of Urology & Radiology
Endorsement Date	
Review Date	
Lead author and designation	Sue Pilcher & Anne Nimmo Urology Nurse Specialists
(if under review) Review led by	To be completed by review lead

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Antibiotic prophylaxis guidelines for Nephrostomy insertion

Antibiotic use during percutaneous nephrostomy significantly decreases the likelihood of sepsis. It is recommended to improve the safety of insertion.

General considerations:

- Antibiotic prophylaxis is indicated for all Nephrostomy insertions.
- Antibiotics should be given 30 minutes prior to surgical incision.

	1 st line recommended antibiotic – given at induction	Alternative antibiotic for severe penicillin allergy – given at induction
Nephrostomy insertion	Co-amoxiclav IV 1.2g	Teicoplanin IV 400 mg
Nephrostomy insertion if in renal impairment	Co-amoxiclav IV 1.2g (followed by reduced doses of 600mg if required).	Discuss with microbiologist if 1 st line unsuitable

References:

Cochran, S.T, Barbaric, Z.L, Lee, J.J and Kashfian, P. (1991) Percutaneous nephrostomy tube placement: an outpatient procedure? **Radiology**. Jun; 179 (3): 843-7

Bootsma, A.M, Pilar Laguna Pes, M, Geerlings, S.A and Gossens, A. (2008) Antibiotic prophylaxis in urological procedures: A systematic review. **European Urology**. 54; 1270 – 1286

Fourcade, R.O. (1990) Antibiotic prophylaxis with cefotaxime in endoscopic extraction of upper urinary tract stones: a randomized study. The Cefotaxime Cooperative Group. **J Antimicrob Chemother**. 26 (suppl A) (77 – 83)

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Zagoria, R.A, Dyer, R.B (1999) Do's and dont's of percutaneous nephrostomy. **Acad Radiology**. Jun; 6 96): 370-7

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Summary and Audit Trail

Development Process							
Title: Guideline Antibiotic prophylaxis for nephrostomy insertion							
Tick the appropriate boxes below to indicate where and to whom the policy applies:							
Trust and Shared Care		Trustwide	X	CBU		Department	X
Multidisciplinary	X	Medical Staff		Nursing / Midwifery		Allied Health Professionals	
Reason for Development: To ensure consistent practice when giving antibiotic prophylaxis for nephrostomy insertion							
Development Lead(s):		Sue Pilcher, urology oncology CNS					
Tel. Number:	X7476		Email Address:		Sue.Pilcher@pbh-tr.nhs.uk		
Development Team Members:				Key sources of evidence			
Sue Pilcher				See references			
Urology Consultants							
Consultation Process							
Please list key Staff Members and Groups/Committees involved in the Consultation Process: Urology CMT and Nurse Specialists							
Please identify committee(s) which will approve the policy:							

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Compliance Monitoring

Policy Title: Guideline Antibiotic prophylaxis for nephrostomy insertion

Author: Sue Pilcher

Process in the policy to be monitored	How will compliance with the outlined process be monitored?	Frequency	By who?	If compliance gaps have been identified, who is responsible for creating an action plan, and ensuring implementation of required changes?
Guideline Antibiotic prophylaxis for nephrostomy insertion	Clinical audit and peer review	Ongoing but at least 2 yearly	Urology Clinical/Specialist Nurse Practitioners	Urology & Radiology CMT

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APPENDIX 1

STAGE ONE : Equality Impact Assessment (EqIA) Screening form

Assessing Functions/Policies for Relevance

Blue boxes are to be filled in

Yellow boxes - Click the box to select from the drop down list

Free text
Select from drop down box

Name of function/service/strategy/policy/project (activity) to be assessed:

Guideline Antibiotic prophylaxis for nephrostomy insertion

Name(s) of those completing this EqIA Screening form:

Sue Pilcher Urology oncology CNS

CBU/Department

Surgery

Date

March 2012

Function/service/strategy/policy/project (activity) aim or purpose:

ensure continuity of care to patients having a nephrostomy insertion

Is this a new or existing activity?

existing activity

What are the intended results of this activity?

staff awareness and patient continuity of care

How will you measure the outcome of the activity?

clinical audit and peer review

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Who is intended to benefit from the activity?

patients having a nephrostomy inserted

Please identify any internal/external groups who have been consulted regarding this activity:

Urology CMT & radiology

Use the table below to identify whether the activity could/does have a positive impact, a negative impact or no impact at all on either any or all of the equality groups specified.

	Age	Disability	Ethnicity/Race	Gender	Religion/Belief	Sexual Orientation
Eliminating unlawful or unjustifiable discrimination	neutral	neutral	neutral	neutral	neutral	neutral
Promoting equality of opportunity	neutral	neutral	neutral	neutral	neutral	neutral
Promoting positive attitudes and good community relations	neutral	neutral	neutral	neutral	neutral	neutral
Eliminating harassment or victimization	neutral	neutral	neutral	neutral	neutral	neutral
Encourage involvement and participation	neutral	neutral	neutral	neutral	neutral	neutral
Eliminating health inequalities	neutral	neutral	neutral	neutral	neutral	neutral

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If there is either a Positive (Disability group exempted) or a Negative impact you must consider completing the Stage Two - Full Equality Impact Assessment form to address or remove any significant potential/actual impact.

Decision to proceed (please select):

If you have selected "Yes, a full EqIA is required", please identify when the Full EqIA will be completed. Date

Reason for decision to proceed or not to full EqIA	Not necessary to proceed to full EqIA
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Executive Director/General Manager - I confirm that I have been briefed and agree with the results of this EqIA.

Name	Chris Dawson	Date	Oct-10
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Job Title	Clinical Lead for Urology and CMT
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Please note the following:

It is essential that this EqIA screening form is discussed by your management team and remains readily available for inspection. A copy should also be forwarded to the Communications team for publication on the Trust's internet site.