**Gentamicin dosing for surgical prophylaxis:**

IDSA/surgical infection society guidelines for surgical prophylaxis recommend a gentamicin dose of **5mg/kg** be utilized

**Below table based on actual body weight will be utilized to determine gentamicin dosing**

<table>
<thead>
<tr>
<th>Patient Weight</th>
<th>Gentamicin Dose</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt; 50 kg</td>
<td>Gentamicin 5mg/kg</td>
</tr>
<tr>
<td>50-70 kg</td>
<td>Gentamicin 350mg IVPB</td>
</tr>
<tr>
<td>&gt;70 kg</td>
<td>Gentamicin 500mg IVPB</td>
</tr>
</tbody>
</table>

***Infuse over time for all doses will be 30 minutes***

**Additional Comments:**

1.) The gentamicin dose will need to be prepared the night before, BUD 48 hours.
2.) Pharmacist will enter preop antibiotic and print the “patient specific” label
3.) Technician to prepare all gentamicin doses for the next day and mark/write at the top of the ACSR sheet the patient will be receiving gentamicin
4.) Preop doses for the next day should be stored in the refrigerator in a bin clearly labeled gentamicin preop doses.
5.) The anesthesia provider will be responsible for picking up the pre-operative antibiotic dose when picking up the controlled substances for the patient.

**New dosing strategy for prophylaxis:**

1. Higher gentamicin dose preop order entered (5mg/kg or 350mg or 500mg depending on weight) **This dose provides 24 hours of prophylaxis**
2. Gent RH to dose order to fire when patient is post op for 24 hours prophylaxis.
3. Pharmacist to review what dose was given preop. If patient received a dose based on new dosing strategy (for example 500mg) then NO ADDITIONAL GENTAMICIN SHOULD BE GIVEN.
4. Pharmacist to verify *gent RPH to Dose* order and not enter additional doses.

**Example:**

- 65kg patient with normal renal function
- Based on new dosing table ➔ preop dose=350mg
- 350mg preop gent ➔ no additional doses needed for 24 hour coverage