VUMC Recommendations for Elective Colorectal Surgery

Preoperative	Intraoperative (Anesthesia)	Intraoperative (Surgical Team)	Postoperative
Preadmission CHG Wipes night before and morning of surgery	Administer appropriate* IV antibiotic within 1 hour prior to incision (2 hours if quinolone antibiotics are given.)	Use chlorhexidine and alcohol-based prep for skin cleansing in the OR unless contraindicated.	Supplemental oxygen in PACU as indicated by patient status.
Mechanical bowel prep until effluent clears.	Redose based on duration of operation and agent.	Wound protectors are used when appropriate.	Discontinue prophylactic antibiotics within 24 hours of surgery.
Oral antibiotic prep after mechanical prep is complete • Neomycin 1 Gm • Metronidazole 1 Gm OR Erythromycin Base 1 Gm At 2pm, 4pm, 10pm day before surgery.	Maintain temp $\geq$ 36° throughout the operation.	**At time of anastomosis/bowel opening**: • The operative area is draped/toweled to not contaminate the current sterile field when the anastomosis is created (dirty portion). • Identified instruments needed for dirty portion are placed on a toweled/draped area on the Mayo stand ; those instruments are exchanged to this location • OR staff minimize taking instruments off the clean table	For patients with diabetes and/or postooperative hyperglycemia, monitor and maintain serum glucose < 200 mg/dl during hospitalization.
Preop day of surgery Check blood glucose in holding; notify provider for BG > 180.	Check intraoperative glucose q 1 hour if patient is hyperglycemic prior to surgery. Goal: glucose < 200; Target: 140 – 180 mg/dl.	**Once the contaminated portion of the case is over** • All dirty instruments, including forceps, needle holders, light handles, suction, and bovie tip are removed along with all drapes/towels applied at the time of anastomosis • All team members change gown and gloves after the anastomosis • The scrub nurse changes gloves only	
Forced air warming to maintain T $\geq$ 36°.	Intraoperative FiO2 at .80.	Anastomosis testing when applicable	

*Approved Antibiotics: cefotetan, cefoxitin, ampicillin/sulbactam **OR**
cefazolin or cefuroxime + metronidazole

If β-lactam allergy: clindamycin + aminoglycoside **OR**
clindamycin + quinolone **OR**
clindamycin + aztreonam **OR**
metronidazole with aminoglycoside, or metronidazole + quinolone

Revised 6/2015