

### 1. Purpose

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To reduce the risk of peripartum infection and its complications for women who undergo operative vaginal birth.

The administration of intravenous amoxicillin + clavulanic acid (Augmentin®) within 6 hours of operative vaginal delivery was associated with a reduction in suspected or confirmed maternal infection within 6 weeks of delivery in the ANODE trial.

### 2. Scope

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This Standard Operating Procedure applies to all ADHB women's health staff and Lead Maternity Carers with access agreements to ADHB.

### 3. Prerequisites

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Operative vaginal birth

### 4. Procedure

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Antibiotic prophylaxis is recommended as soon as possible after birth (and no longer than 6 hours after birth) for women who undergo assisted vaginal birth to reduce the risk of postpartum infection.

The recommended regime is:

#### Intravenous:

- Amoxicillin 1 g + clavulanic acid 200 mg (Augmentin®) injection stat within 6 hours of delivery

#### Oral (if no IV access):

- ONE amoxicillin 500 mg + clavulanic acid 125 mg (Augmentin®) tablet AND
- ONE amoxicillin 500 mg capsule stat within 6 hours of delivery

#### Penicillin allergic women:

- Cefazolin 2 g IV or clindamycin 600 mg IV within 6 hours of delivery are suggested alternatives

#### **Considerations:**

#### Trial Instrumental delivery in theatre:

- Ensure that the Anaesthetic Team is aware of the contingency plan regarding prophylactic antibiotics, and to only give cefazolin if a definite decision has been made for Caesarean

# Standard Operating Procedure

## Antibiotic Prophylaxis for Women undergoing Operative Vaginal Birth

### Section

#### Manual Removal of Placenta or 3<sup>rd</sup>/4<sup>th</sup> degree tear:

- No additional IV antibiotic prophylaxis required as Amoxicillin + clavulanic acid has broad anaerobic cover (where cefazolin does not). Patients can finish a course of oral antibiotics if appropriate.

### References

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1. Knight M, Chiochia V, Partlett C, Rivero-Arias O, Hua X, Hinshaw K, et al. Prophylactic antibiotics in the prevention of infection after operative vaginal delivery (ANODE): a multicentre randomised controlled trial, Lancet. 2019;393(10189):2395-403.  
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2. RANZCOG Statement. Instrumental Vaginal Birth. March 2020.  
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3. WHO recommendation on Routine antibiotic prophylaxis for women undergoing operative vaginal birth  
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