## RELATIONSHIP OF LONG-TERM ANTIBIOTIC PROPHYLAXIS IN UROLOGY WITH *CLOSTRIDIOIDES DIFFICILE* INFECTIONS IN HOSPITALISED ADULT PATIENTS AT A MULTIPROFILE PROVINCIAL HOSPITAL IN TARNOW, POLAND.

## Supplement

Depending on the type of the surgical procedure, mode of preparing the patient for surgery, and the use of implants, various regimens were employed in the antibiotic perioperative prophylaxis:

- (I) Regimen I (antibiotic was applied only in the operating theatre): clean, cleancontaminated procedures, other than the ones indicated below: cefazolin IV at a dose of 1 or 2 g (depending on the patient's weight) for up to 30 min before skin incision, the dose was repeated if the procedure was longer than 3h;
- (II) Regimen II (antibiotics administered in the ward for up to 48 h after surgery): clean procedures: vascular graft, hernia repair with mesh, mastectomy, lymphatic system, implants and spine treatments, cholecystectomy with opening of the bile duct: cefazolin IV at a dose of 1 or 2 g (depending on the patient's weight) for up to 30 min before skin incision, the dose was repeated if the procedure was longer than 3h; continuation in the ward: 1 dose 8 h after the next one and continued every 8 h;

## (III) Regimen III (antibiotics administered in the ward for up to 72 h after surgery):

- A: elective procedures: large and small intestine, gastrectomy, pancreatic resection: cefazolin IV at a dose of 1 or 2 g (depending on the patient's weight) for up to 30 min before skin incision, the dose was repeated if the procedure was longer than 3h + metronidazole IV at a dose of 0.5 g min. 1 h before skin incision, the dose of metronidazole was repeated if the procedure was longer than 6 h; continuation in the ward: 1 dose 8 h after the next one and continued every 8 h;
- **B:** elective procedures: urinary tract, TURP, pyelotitotomy: cefazolin IV at a dose of 1 or 2 g (depending on the patient's weight) for up to 30 min before skin incision, the dose was repeated if the procedure was longer than 3 h + ciprofloxacin IV at a dose of 0.4 g min. 1 h before skin incision the dose of

ciprofloxacin was repeated if the procedure was longer than 7 h; continuation in the ward: 1 dose 8 h after the next and continued every 8 h, ciprofloxacin 12 h after the last dose and continued for 12h;

C: elective procedures: implantation, revision arthroplasty: cefazolin IV at a dose of 1 or 2 g (depending on the patient's weight) for up to 30 min before skin incision, the dose of cefazolin was repeated if the procedure was longer than 3h + clindamycin IV at a dose of 0.3 g or 0.6 g (depending on the patient's weight) or vancomycin at a dose of 0.6 or 1.0 g (depending on the patient's 1–2 before the weight) approx. hrs skin incision, dose of clindamycin/vancomycin was repeated if the procedure was longer than 6 h; continuation in the ward: 1 dose respectively (cefazolin+clindamycin or cefazolin+vancomycin) 8 h after the next and continued every 8h.