

For patients who have a penicillin allergy or who have taken a penicillin or cephalosporin-group antibiotic* more than once in the past four weeks:

Clindamycin 600mg (child – 15mg/kg up to 600mg);

- Orally, 1 hour before the procedure
OR
- IV, over at least 20 minutes, just before the procedure
OR
- IM, 30 minutes before the procedure
OR

Clarithromycin 500 mg (child – 15mg/kg up to 500mg) orally, 1 hour before the procedure.

Beware of potential interactions between clarithromycin and other medications.

Antibacterial agents may be given up to 2 hours after the procedure if inadvertently not given beforehand.

**includes those on long-term penicillin prophylaxis for rheumatic fever*

Antibacterial regimen for surgery and procedures at sites of established infection should include:

Dental or upper respiratory tract infections:

Amoxicillin (clindamycin or clarithromycin if penicillin allergy)

Gastrointestinal, hepatobiliary, genitourinary or obstetric/ gynaecological infections:

Amoxicillin (vancomycin if penicillin allergy)

Skin, skin-structure or musculoskeletal infections:

Flucloxacillin (a cephalosporin if mild penicillin allergy, clindamycin if severe penicillin allergy or suspect MRSA).

National Heart Foundation of New Zealand
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Advice to Prevent Infective Endocarditis

Please carry this card with you.

Information for patient, parents and guardians

Has a heart condition which requires antibacterial (antibiotic) protection before some dental and surgical procedures.

You must show this card to any dentist, dental therapist or doctor BEFORE treatment is started.



General Advice

1 Clean teeth regularly using manual and powered toothbrushes, floss and antibacterial mouthwashes.

**Hospital medical check-ups
DO NOT replace visits to your
local dentist or dental therapist.**

- 2 Avoid sugary foods and drinks to reduce the need for dental surgery.
- 3 Have regular dental check-ups to help keep teeth and gums healthy.
- 4 Use a mouth guard for contact sports to help protect teeth.
- 5 Antibacterials (antibiotics) are not needed for natural loss of baby teeth.

Advice based on the *New Zealand Guideline for Prevention of Infective Endocarditis Associated with Dental and Other Medical Interventions (2008)*.
For more information, visit:
www.heartfoundation.org.nz

Information for doctor, dentist and dental therapist

This patient is at risk of infective endocarditis and requires prophylaxis as detailed below.

Antibacterial prophylaxis is necessary for all dental procedures that involve manipulation of the gingival tissue or the periapical region of teeth or perforation of the oral mucosa.

Dental Procedures (plus Tonsillectomy and Adenoidectomy)

For patients who have not received a penicillin or cephalosporin-group antibiotic in the past four weeks:

Amoxicillin 2g (child 50mg/kg up to 2g);

- Orally, 1 hour before the procedure
OR
- IV, just before the procedure
OR
- IM, 30 minutes before the procedure.

*Administer parentally if unable to take orally.
Administer IV if IV access is readily available.*