Surgical Wound Classification

The more contamination, the more antibiotic: from none, to prophylaxis, to treatment

I — Clean

digestive, respiratory and urinary tracts not entered · no prophylaxis unless a prosthesis is implanted

II — Clean-contaminated

those tracts are entered in a controlled way, without spillage · antibiotic prophylaxis

III — Contaminated

spillage of infected contents or acute inflammation · prophylaxis mandatory

IV — Dirty

pus, established perforation or feces · antibiotic treatment, not prophylaxis

When to give it
At anesthetic induction: 30-60 min before incision

Usually one dose
Prolonging it does not reduce infections

Dirty
Infection already present: treat it

The risk of wound infection rises with each class: lowest in clean surgery, highest in dirty surgery