Antibiotic prophylaxis for gastrointestinal endoscopic procedures are described in Table 5-1. One acceptable antibiotic prophylaxis regime consists of intravenous ampicillin 2 g and gentamicin 1.5 mg/kg (up to 80 mg) 30 minutes prior to the endoscopic procedure, followed by amoxicillin 1.5 g orally 6 hours after the procedure. For penicillin-sensitive patients, vancomycin or clindamycin may be substituted.

Patients undergoing percutaneous gastrostomy tube placement should receive cefazolin 1 g 30 minutes prior to the procedure. If, however, these patients are already on an equivalent antibiotic, no other antibiotic medications are necessary.

**DIABETES MELLITUS**

Diabetes mellitus is a metabolic abnormality resulting from insufficient production of insulin by the pancreas, leading to elevated blood glucose levels (hyperglycemia). Blood glucose levels greater than 200 mg/dL, polydipsia, polyuria, fatigue, and weight loss characterize the disease. Special considerations during endoscopy are listed next.

**PREPROCEDURE**

- Uncomplicated, well-controlled patients should be instructed to take half their normal insulin dose on the day of their procedure. Patients taking oral hypoglycemics should be instructed to omit their morning dose on the day of the procedure.