INTRODUCTION

It is well documented that prophylactic antibiotic coverage of most ‘clean contaminated’ surgical procedures can significantly prevent infectious complications, including wound infections, thereby affecting the overall mortality and morbidity. However the benefit of antibiotic prophylaxis in other ‘clean surgical procedures, such as laparoscopic cholecystectomy, has been questionable. The low rate of wound infections and the straightforward treatment, if they occur at all, are the main arguments against routine antibiotic coverage during laparoscopic cholecystectomy. Laparoscopic cholecystectomy is an elective clean operation, and the post-operative wound infections would be very low. Prophylaxis in clean operations has been shown to be of value in other areas of surgery such as trauma and vascular surgery but in laparoscopic cholecystectomy, its benefits remain uncertain. Due to the unknown impact on bacterial resistance, Waldvogel and associates suggested that the routine use of antibiotic prophylaxis should be discouraged.

AIM AND OBJECTIVE

To compare the impact of single dose of prophylactic intravenous antibiotic at induction of anaesthesia alone with intravenous antibiotic continued in the post-operative period in terms of post-operative infection related complication.
1. To avoid unnecessary long post operative antibiotic regimen
2. To reduce the hospital cost hence we can improve the cost effectiveness
3. To prevent antibiotic resistance

**METHODOLOGY**

All patients who fulfill the inclusion criteria were included in the study after obtaining written informed consent. Patients age, sex, occupation, presenting complaints noted. Patients are allocated as two group. Study group receiving inj. cefotaxim 1 gm IV at the time of anaesthesia induction. Control group receiving inj cefotaxim 1 gm IV at the time of anaesthesia induction which will be continued in the post operative period. Post operatively patients were monitored. Port site infections and other post operative complications observed.

**RESULTS**

Based on the findings of our study, it may be concluded that post operative antibiotics do not reduce post-operative infective complications after elective laparoscopic cholecystectomy for cholelithiasis. One single dose of prophylactic antibiotic, administered at induction of anaesthesia, is sufficient to prevent post operative infective complications in patient undergoing elective laparoscopic cholecystectomy.