

Prevention of Infection Following a Total Joint Replacement

You have undergone a total joint replacement procedure. There are instances where infection in one part of your body may cause bacteria to circulate in your blood, possibly resulting in infection at the site of your implant. Therefore, it is essential that you seek prompt treatment of infections anywhere in your body. The signs of an infection in your total joint implant might include pain, swelling, fever, warmth over the joint, or other unusual symptoms. **You should contact our office if you have any concerns that you might have an infection in your total joint implant.** You should contact your physician or your dentist if you have any concerns that you might have an infection in other areas of your body.

Dental Care

Good dental hygiene is important and you should see your dentist for regular dental care whether or not you are having a dental problem. Before you have any dental procedure we recommend that you take 2 grams of cephalexin (Keflex) one hour prior to the procedure. If you are allergic to cephalexin or penicillin or are unable to take cephalexin (Keflex) for any other reason we recommend that you take clindamycin 600 mg one hour before the procedure. Your dentist can order that for you, or you can contact our office at 360-254-6161 for a prescription prior to your dental appointment. These guidelines should be followed for the rest of your lifetime.

Other Invasive Procedures

When having any type of surgery or invasive procedure, it is important to inform your doctor who will be performing the procedure that you have had a total joint replacement. Your doctor can then make the determination of whether or not prophylactic antibiotics are needed. Please share the prescribing guidelines on page 2 with your doctor. Please contact our office at 360-254-6161 if you need additional copies of these recommendations. These guidelines should be followed for the rest of your lifetime.

(See attached sheet for prescribing details.)

The above recommendations follow the February 2009 guidelines of the American Academy of Orthopaedic Surgeons which can be viewed at: <http://www.aaos.org/about/papers/advistmt/1033.asp>

Preventative Antibiotic Recommendations for Procedures

Procedure	Antibiotic	Dose	Timing
Dental	Cephalexin	2 gm po	1 hour before procedure
If allergic to cephalexin or Penicillin	Clindamycin	600 mg po	1 hour before procedure
Orthopedic	Cefazolin Cefuroxime or Vancomycin	1-2 g IV 1.5 g IV 1 g IV	Begin dose 60 minutes prior to procedure (prior to inflation of tourniquet)
Vascular	Cefazolin OR Vancomycin	1-2 g IV 1 g IV	Begin dose 60 minutes prior to procedure
Gastrointestinal Esophageal, Gastroduodenal Biliary Tract Colorectal	Cefazolin Neomycin + erythromycin base (oral) OR metronidazole (oral)	1-2 g IV 1 g 1 g	Begin dose 60 minutes prior to procedure dependent on time of procedure. Consult with GI physician and/or pharmacist
Head and neck	Clindamycin + Gentamicin OR Cefazolin	600-900 mg IV 1.5 mg/kg IV 1-2 g IV	Begin dose 60 minutes prior to procedure
Obstetric and gynecological	Cefoxitin, cefazolin Ampicillin/sulbactam	1-2 g IV 3 g IV	Begin dose 60 minutes prior to procedure
Genitourinary	Ciprofloxacin	500 mg po or 400 mg IV	1 hour prior to procedure Begin dose 60 minutes prior to procedure
Ophthalmic (eye)	Gentamicin, tobramycin, Ciprofloxacin, gatifloxacin, levofloxacin, moxifloxacin, ofloxacin, or subconjunctivally meomycin-gramicidin-polymyxin B cefazolin	Multiple drops topically over 2-24 hours or 100 mg subconjunctivally	Consult Ophthalmologist or pharmacist for dosing schedule

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