

# Your Joint Replacement, Urological Procedures, & Antibiotics

***If you have a joint replacement, do you need antibiotics when you have a urological appointment?***

If you have had an orthopaedic joint replacement in the past and you are going to have a urological procedure in the future, you may need preventive antibiotics before the urological procedure if one or more items on List A **AND** one or more items on List B apply to you.

If you do not fit into both List A and List B, you may not need preventive antibiotics before your urological procedure.

**LIST A: High Risk Urological Procedures**

- Operation for stone in kidney or ureter
- Extracorporeal Shock Wave Lithotripsy (ESWL)
- Any procedure with an incision into the wall of the urinary tract (not including percutaneous drainage only).
- Endoscopy of ureter or kidney
- Any procedure using bowel segments
- Transrectal prostate biopsy
- Any procedure with entry into the urinary tract in the presence of any one or more of the following:
  - Indwelling urethral catheter
  - Current use of intermittent catheterization
  - Indwelling ureteral stent
  - Inability to urinate
  - Recent or recurrent urinary tract infection
  - Recent or recurrent prostatitis
  - History of urinary diversion

**LIST B: High Risk Patients with an Orthopaedic Joint Replacement**

- Joint replacement in past two years
- Previously infected artificial joint.
- Inflammatory Arthritis
- Insulin-Dependent (Type I) diabetes
- Hemophilia
- Immunosuppression
- Malnutrition
- History of malignancy
- Current malignancy

**One of these preventive antibiotics may be prescribed for you:**

- A single systemic level dose of a quinolone (e.g., ciprofloxacin, 500 mg; levofloxacin, 500 mg; ofloxacin, 400 mg) orally one to two hours preoperatively.
- Ampicillin 2 gm IV (or vancomycin 1 gm IV over 1 to 2 hours, in patients allergic to ampicillin) plus gentamicin 1.5 mg/kg IV 30 to 60 minutes preoperatively.

These guidelines were developed by the American Academy of Orthopaedic Surgeons and the American Urological Association. They are designed to help practitioners make decisions about preventive antibiotics for urological patients with artificial joints. They are not a standard of care or a substitute for the practitioner's clinical judgment. Practitioners must exercise their own clinical judgment in determining whether or not preventive antibiotics are appropriate. Pediatric doses may be different.

Date of Joint Surgery \_\_\_\_\_  
 Orthopaedic Surgeon \_\_\_\_\_  
 Urologist \_\_\_\_\_

Date of Urological Procedure \_\_\_\_\_  
 Phone Number ( ) \_\_\_\_\_  
 Phone Number ( ) \_\_\_\_\_