



Рекомендации Американской академии хирургов-ортопедов

Антибиотики после пересадки сустава

Инфекция в области заменённого сустава может носить очень серьёзный характер и обойтись очень дорого. Поэтому Американская академия хирургов-ортопедов рекомендует клиницистам подумать о назначении всем пациентам, которым был полностью заменён сустав, антибиотиков перед любой процедурой, которая может привести к попаданию бактерий в кровь. В данной таблице показаны рекомендации о профилактическом приёме антибиотиков на 2009 год. **Покажите эту таблицу врачу перед прохождением любой стоматологической или медицинской процедуры.**

Если у вашего хирурга, семейного врача или стоматолога есть вопросы о профилактическом приёме антибиотиков, попросите их позвонить в Центр хирургии костей и суставов медицинского центра университета штата Вашингтон по телефону 206-598-4288.

Procedure	Antimicrobial Agent	Dose	Timing	Duration
Dental	Cephalexin, cephradine, amoxicillin	2 gm by mouth	1 hour before procedure	Discontinued within 24 hours of the procedure. For most outpatient/ office-based procedures, a single pre-procedure dose is adequate.
Ophthalmic (eyes)	Gentamicin, tobramycin, ciprofloxacin, gatifloxacin, levofloxacin, moxifloxacin, ofloxacin, OR meomycin-gramicidin-polymyxin B cefazolin	Multiple eye drops topically over 2 to 24 hours OR 100 mg subconjunctivally	Consult with ophthalmologist or pharmacist for dosing regimen	
Orthopaedic (bones and joints)	Cefazolin, Cefuroxime, OR Vancomycin	1 to 2 g IV 1.5 g IV 1 g IV	Begin dose 1 hour before procedure	
Vascular (blood vessels)	Cefazolin OR Vancomycin	1 to 2 g IV 1 g IV	Begin dose 1 hour before procedure	
Esophageal, Gastroduodenal (food tube, stomach, 1st part of small intestine)	Cefazolin	1 to 2 g IV	Begin dose 1 hour before procedure	
Biliary tract (gallbladder, bile ducts)	Cefazolin	1 to 2 g IV	Consult with health care provider and/or pharmacist	
Colorectal (colon, rectum)	Neomycin + erythromycin base (oral)	1 g	Depends on time of procedure – consult with gastroenterologist and/or pharmacist	
	OR metronidazole (oral)	1 g		
Head and neck	Clindamycin + gentamicin OR cefazolin	600 to 900 mg IV 1.5 mg/kg IV 1 to 2 g IV	Begin dose 1 hour before procedure	
Obstetric and Gynecological (female organs)	Cefoxitin, cefazolin Ampicillin/sulbactam	1 to 2 g IV 3 g IV	Begin dose 1 hour before procedure	
Genitourinary (genital or urinary tract)	Ciprofloxacin	500 mg by mouth or 400 mg IV	Begin dose 1 hour before procedure	

American Academy of Orthopaedic Surgeons Recommendations

Antibiotics after joint replacement

An infected total joint replacement can be very serious, and treating it can be very costly. Because of this, the American Academy of Orthopaedic Surgeons recommends that clinicians consider treating all patients who have total joint replacements with antibiotics before they have any procedure that may bring bacteria into their bloodstream. This table shows their 2009 prophylactic antibiotic recommendations. **Please show this table to your doctor before you have any dental or medical procedures done.**

If your surgeon, primary care provider, or dentist has any questions about prophylactic antibiotics, please ask them to call the Bone and Joint Surgery Center at 206-598-4288 at University of Washington Medical Center.

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Orthopaedic (bones and joints)	Cefazolin, Cefuroxime, OR Vancomycin	1 to 2 g IV 1.5 g IV 1 g IV	Begin dose 1 hour before procedure	
Vascular (blood vessels)	Cefazolin OR Vancomycin	1 to 2 g IV 1 g IV	Begin dose 1 hour before procedure	
Esophageal, Gastroduodenal (food tube, stomach, 1st part of small intestine)	Cefazolin	1 to 2 g IV	Begin dose 1 hour before procedure	
Biliary tract (gallbladder, bile ducts)	Cefazolin	1 to 2 g IV	Consult with health care provider and/or pharmacist	
Colorectal (colon, rectum)	Neomycin + erythromycin base (oral)	1 g	Depends on time of procedure – consult with gastroenterologist and/or pharmacist	
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