

## *A Patient's Guide to* **Postsurgical Infection**



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This education section was created to help my patients and referring physicians learn more about common orthopedic and sports injuries.

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One of the greatest advances in surgery during the twentieth century has been in understanding how to reduce the risk of infection during and after surgery. Any surgical procedure, no matter how small, carries the risk of infection. Simple procedures, such as placing a needle into a joint to remove fluid or inject medications, have a very low risk. More complex operations that require larger incisions and leave the skin open for longer have a higher risk. Operations done to insert something into the body, such as metal plates or artificial joints, must be done carefully to ensure that the foreign material that is left in the body does not carry infection with it. Preventing infection is one of the most important parts of any operation. All members of the health care team take preventing infection very seriously.

Infection prevention begins before surgery. Your doctor will make sure that no infections exist that may spread to cause problems with your surgery. If you have a skin infection, a bladder infection, or some other type of infection, your surgery may be postponed until the infection is treated and under control.

The morning before surgery, you may be asked to shower with antibacterial soap to reduce the number of bacteria on the skin. Before surgery begins, the skin around the incision site will be cleansed and *prepped* with a disinfectant, such as iodine. Before surgery, you may be given a dose of antibiotics. This is not true for all types of surgeries. Operations that have a low risk of infection usually do not require antibiotics as a precaution. Many orthopedic operations do require antibiotics, especially those operations where something artificial is left in the body.

During surgery, great care is taken to ensure that the entire operation is done under sterile conditions. Surgery is performed in a sterile room that is designed to prevent the spread of infection. All the items needed for surgery are sterilized.

Your wound dressing will also be applied under sterile conditions before you leave the operating room. The wound dressing is an important barrier against infection until the incision seals itself. This usually occurs in the first few days. If an incision is still seeping any type of drainage, this can be an avenue for germs to enter the wound. The dressing will be kept in place until all drainage stops and the incision seals itself.

After surgery, you may continue on antibiotics for 24 to 72 hours. This is to help reduce the chance of infection.

While you are in the hospital or surgery center, your health care team will make sure your bandage stays dry and clean. A bandage that has soaked through can create an entryway for germs to enter the wound. Alert your nurse if this occurs. Before leaving the hospital or surgery center, you will be taught how to take care of your incision. The same instructions apply if you see extra drainage after your return home. Change the dressing, and call to let your nurse know.

Notice that the health care team always washes their hands before changing the bandage. You should do the same. If you develop an infection anywhere else in your body after surgery, let your doctor know. Some infections can spread and cause problems with the surgery.

Follow these guidelines:

- Wash your hands before changing your bandage.
- Change your bandage as instructed.
- Don't get the incision wet unless your doctor tells you to.
- Don't put any medication on the incision unless your doctor tells you to.
- Don't scratch or pick at the incision.

If you develop any of the following warning signs of infection, contact your doctor:

- fever
- increased redness around the incision
- increased swelling around the incision
- drainage from the wound for more than five days after surgery
- drainage from the wound that is cloudy, yellow, or foul smelling
- pain that increases and becomes constant.

## Notes