



TOTAL KNEE REPLACEMENT SURGICAL SITE INFECTION 2015-2017

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Total Knee Replacement Infection

	2015	2016	2017
Total Knee Replacement Surgical Site Infection Rate per 100 procedures	0.9	0.3	0.3
Infections	9	3	3
Procedures	1037	1068	1131

Key Changes for Improvement

- Use an alcohol-containing antiseptic agent for preoperative skin preparation
- Instruct patients to bathe or shower with chlorhexidine gluconate (CHG) soap for at least three days before surgery
- Screen patients for *Staphylococcus aureus* (SA) and decolonize SA carriers with five days of intranasal mupirocin and bathing or showering with chlorhexidine gluconate soap for at least three days before surgery
- Appropriate use of prophylactic antibiotics
- Appropriate hair removal

- As evidence that not all providers are following best practices, CMS points out that rates of complications at some facilities are three times higher than they are at other facilities. And the average Medicare expenditure for surgery, hospitalization, and recovery ranges from \$16,500 to \$33,000 across geographic areas.

- Use an alcohol-containing antiseptic agent for preoperative skin preparation. Yes
- Instruct patients to bathe or shower with chlorhexidine gluconate (CHG) soap for at least three days before surgery. No Chlorhexidine wipes used night before surgery and again in the pre-op area.
- Screen patients for *Staphylococcus aureus* (SA) and decolonize SA carriers with five days of intranasal mupirocin and bathing or showering with chlorhexidine gluconate soap for at least three days before surgery. No One surgeon screens and decolonize. All other surgeons use iodine nasal swabs in the pre-op area for all patients.
- Appropriate use of prophylactic antibiotics. Yes
- Appropriate hair removal. Yes

New strategies instituted

- Introduced using betadine in incision in the OR prior to closing.
- Surgeons inject a total joint solution that contains an antibiotic among other medications.
- Surgery department move to a new facility at Toledo Hospital in August 2015