

Education

Incision and Drainage of a Joint

What is incision and drainage of a joint?

Incision and drainage of a joint is a procedure in which your health care provider makes an incision or cut over an infected joint and drains it.

When is it used?

A health care provider performs this procedure to treat an infection that may be in a joint.

How do I prepare for incision and drainage of a joint?

Plan for your care and recovery after the operation. Allow for time to rest and try to find other people to help you with your day-to-day duties.

Follow your health care provider's instructions about not smoking before and after the procedure. Smokers heal more slowly after surgery. They are also more likely to have breathing problems during surgery. For this reason, if you are a smoker, you should quit at least 2 weeks before the procedure. It is best to quit 6 to 8 weeks before surgery. Also, your wounds will heal much better if you do not smoke after the surgery.

Follow any other instructions your provider gives you. If you are having general anesthesia, do not eat or drink anything after midnight and the morning before the procedure. Do not even drink coffee, tea, or water.

What happens during the procedure?

Your health care provider will give you a regional or general anesthetic, depending upon which joint is being operated on. A regional anesthetic numbs part of your body while you remain awake. It should keep you from feeling pain during the operation. A general anesthetic relaxes your muscles, puts you to sleep, and also prevents you from feeling pain.

Your provider will make a cut over the joint. Then he or she will open the joint, wash out the joint, drain the infection, and remove damaged tissue. Your provider may close the cut or leave it open to drain. He or she may give you antibiotics.

What happens after the procedure?

You may be in the hospital for a number of days, depending on the findings at the time of the operation. You will be given pain medicine. Your provider may need to repeat the drainage procedure before you leave the hospital. You may need to take antibiotics if your provider thinks there is an infection.

You may have a cast or splint on your arm or leg to limit its movement. You may have to pack the wound and change the dressing. Someone will show you how to do this. When the cast or splint is removed, you may be given exercises to help regain range of motion in the joint.

Ask your health care provider how soon you can resume your normal activities, including returning to work. Ask when you should come back for a checkup.

What are the benefits of this procedure?

It may remove the infection in the joint. Removing the infection prevents damage to the cartilage and bone. It also helps prevent spread of the infection into the bone or blood.

What are the risks associated with this procedure?

- There are some risks when you have general anesthesia. Discuss these risks with your health care provider.
- A regional anesthetic may not numb the area quite enough and you may feel some minor discomfort. Also, in rare cases, you may have an allergic reaction to the drug used in this type of anesthesia. In most cases regional anesthesia is considered safer than general anesthesia.
- There is a risk of infection or bleeding from this procedure.
- There could be damage to the joint, local nerves, tendons, or blood vessels.
- The infection may not go away despite treatment.

- The infection could spread to other areas, especially if it is not treated.

You should ask your health care provider how these risks apply to you.

When should I call my health care provider?

Call immediately if:

- You develop a fever over 102.5° F (39.1° C).
- The wound begins to bleed and won't stop.
- Your pain increases.
- You have more swelling.
- You feel sick or faint.

Call during office hours:

- To make your follow-up appointment.
- You have questions about the procedure or its result.

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