

Dr. Robert Sershon

Hip and Knee Replacement Specialist

Joint Replacement Medication Schedule Example

Please refer to the **HOW TO TAKE YOUR MEDICATIONS** handout for an explanation of each medication.

Tylenol, anti-inflammatories, and icing are **ESSENTIALS** for pain control. These should not be stopped before your 4-week visit unless you have been instructed otherwise. Narcotic medications will not control your pain unless you are routinely taking Tylenol, an anti-inflammatory, and icing.

Medication Schedule Example – Weeks 1 & 2						
	Wake	Breakfast	Lunch	Dinner	Bedtime	Night
Aspirin 81mg		1 tab		1 tab		
Celecoxib 200mg		1 tab				
Tylenol 500mg	2 tabs		2 tabs		2 tabs	
Tramadol 50mg	1-2 tabs		1-2 tab	1-2 tab		1 tab
Oxycodone 5mg		1-2 tabs	1-2 tabs	1-2 tabs	1 tab	1 tab
Senna-S 50-8.6mg	2 tabs			2 tabs		
Zofran 4mg		1 tab	1 tab	1 tab		

*** Ice therapy for 20 minutes every hour ***

*** Oxycodone and tramadol are taken as needed for moderate-severe pain ***

Medication Schedule Example – Weeks 3 & 4				
	Breakfast	Lunch	Dinner	Night
Aspirin 81mg	1 tab		1 tab	
Celecoxib 200mg	1 tab			
Tylenol 500mg	1-2 tabs	1-2 tabs	1-2 tabs	
Tramadol 50mg	1 tab	1 tab	1 tab	1 tab
Oxycodone 5mg	1 tab	1 tab	1 tab	1 tab
Senna-S 50-8.6mg	2 tabs		2 tabs	
Zofran 4mg	1 tab	1 tab	1 tab	

*** Ice therapy for 20 minutes every 1-2 hours***

*** Oxycodone and tramadol are taken as needed for moderate-severe pain ***

HOW TO TAKE YOUR MEDICATIONS

- Pick up your medications from the pharmacy you provided us 5-7 days prior to surgery.
- Unless instructed otherwise, the only prescribed drug(s) taken before surgery are the anti-inflammatory medication (Celecoxib, Etodolac, Meloxicam) and Flomax if prescribed.
- Remember to pick up Aspirin, Tylenol, and stool softener. These are over-the-counter.

For certain patients, the medications prescribed will differ from those shown in the table below. This is because The Anderson Orthopaedic Institute personalizes each patient's medications.

Pain Control	
<p><i>*In order of importance: Tylenol, Anti-inflammatory, Tramadol, Narcotic Non-Narcotic: Acetaminophen, Anti-inflammatory Narcotic: Tramadol, Oxycodone, Hydrocodone, Dilaudid</i></p>	
<p>Acetaminophen (Tylenol) <i>Mild, moderate, and severe pain</i></p>	<p>Tylenol should be taken as directed until all of your pain is gone. Tylenol is the <u>last</u> medication you should wean from. Do not exceed 3 grams/day.</p>
<p>Meloxicam (Mobic) Celecoxib (Celebrex) Etodolac (Lodine)</p>	<p>Taken as directed for <u>1 month</u> following surgery. These medications are very effective at decreasing pain and inflammation. Do not stop taking this prior to 1 month unless you no longer need Tylenol, Tramadol, and Oxycodone.</p>
<p>Tramadol (Ultram) <i>Moderate and severe pain</i></p>	<p>If Tylenol by itself is not sufficient for pain control, <u>then</u> take Tramadol. Tramadol is the <u>second</u> medication you should wean from.</p>
<p>Oxycodone 5mg <i>Severe and breakthrough pain</i></p>	<p>If Tylenol and Tramadol together are not adequately controlling your pain, then add oxycodone as your <u>rescue pain medication</u>. This is the <u>first</u> medication you should wean from.</p>

Blood Clot Prevention	
<p><i>*Only one of the medications listed below will be prescribed</i></p>	
<p>Aspirin Rivaroxaban (Xarelto) Warfarin (Coumadin)</p>	<p>Take as directed for 1 month following surgery. Do not stop taking this prior to 1 month unless otherwise instructed.</p>

Other Helpful Medications	
<p>Colace 2-in-1 Senna-S 50-8.6mg MiraLAX</p>	<p>For <u>constipation</u>. If you are not constipated, you do not need this. For patients who suffer from <u>chronic constipation</u>, you should continue your stool softener until the day of surgery.</p>
<p>Ondansetron (Zofran) 4mg</p>	<p>For <u>nausea</u>. If you are not nauseous, you do not need this.</p>
<p>Tamsulosin (Flomax)</p>	<p>For select males, Flomax is prescribed to prevent <u>urinary retention</u>.</p>