

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	3pm	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	1-2 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

**In order of importance: Tylenol, Anti-inflammatory, Tramadol, Narcotic
Non-Narcotic: Acetaminophen, Anti-inflammatory
Narcotic: Tramadol, Oxycodone, Hydrocodone, Dilaudid*

Acetaminophen (Tylenol) <i>Mild, moderate, and severe pain</i>	Tylenol should be taken as directed <u>until all of your pain is gone</u> . Tylenol is the <u>last</u> medication you should wean from. Do not exceed 3 grams/day.
Meloxicam (Mobic) Celecoxib (Celebrex) Etodolac (Lodine)	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.
Tramadol (Ultram) <i>Moderate and severe pain</i>	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.
Oxycodone 5mg <i>Severe and breakthrough pain</i>	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.

Blood Clot Prevention

**Only one of the medications listed below will be prescribed*

Aspirin Rivaroxaban (Xarelto) Warfarin (Coumadin)	Take as directed for 1 month following surgery. Do not stop taking this prior to 1 month unless otherwise instructed.
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Other Helpful Medications

Colace 2-in-1 Senna-S 50-8.6mg MiraLAX	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.
Ondansetron (Zofran) 4mg	For <u>nausea</u> . If you are not nauseous, you do not need this.
Tamsulosin (Flomax)	For select males, Flomax is prescribed to prevent <u>urinary retention</u> .