

Peri-prosthetic Joint Sample Form

Patient ID label here

Sample Date	Time
Lab Use Only	

Antibiotic prophylaxis withheld before sampling?
(circle)

YES **NO**

Clinical details:

A. Joint Details

Joint type: Hip ☐ Knee ☐

Other (specify) _____

Joint Side: Left ☐ Right ☐

B. Tests

Routine MC&S (10 days) ☐

Other (specify) _____

C. Sample site

Circle

- | | | | |
|---------|--------|----------|-------------|
| 1. | Tissue | Aspirate | Other _____ |
| 2. | Tissue | Aspirate | Other _____ |
| 3. | Tissue | Aspirate | Other _____ |
| 4. | Tissue | Aspirate | Other _____ |
| 5. | Tissue | Aspirate | Other _____ |

D. Instructions

At least five culture specimens should be sent whenever periprosthetic joint infection is suspected. Tissue and aspirate cultures are preferred (swabs are discouraged).

Label 5 separate specimen collection pots (1-5) and place one corresponding sample in each pot as indicated on the specimen sites.

Full details can be found in the "Counties Manukau periprosthetic joint infection (PJI) sampling guideline" on southnet.

(http://southnet/Medicine-InfectiousDiseases/Ortho_guidelines.htm)

E. Requestor: _____

Contact No: _____