

Date: 09/11/2018

FREEDOM OF INFORMATION REQUEST FOI/014410 – Septic arthritis

I am interested in the variation between the guidelines in UK relating to the management of septic arthritis. Please complete the two attached surveys and forward them to this email address. I would also be very grateful if you would forward to this email address the guidelines your hospital uses for septic arthritis in both paediatrics and adult populations. If you don't currently use a guideline I would also be grateful to know

Please see below

Septic Arthritis in Children Questionnaire

1. Which hospital do you work at?

Russells Hall

2. How many paediatric patients with septic arthritis does your hospital manage in a year?

Very few

3. Does your department have a written guideline for the investigation and management of potential septic arthritis in children?

Yes	x
No	
Verbal Only	

4. Where is your guideline taken from? (For example, BSCOS, locally derived guideline etc.)

Bedside Clinical Guidelines Partnership in association with partners in paediatrics

5. When septic arthritis is a differential diagnosis, which imaging modalities are routinely requested?

Plain film radiographs of the joint	x	Ultrasound	x
MRI		Other (please specify)	

Please specify:

6. When the diagnosis is unclear, what additional imaging is requested?

MRI	x	Ultrasound	
No additional imaging requested		Other (please specify)	

Please specify:

7. Do you have the facilities in your hospital to perform an MRI scan under general anaesthetic or sedation, if required?

Yes	x	No	
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8. If aspiration is indicated, in which clinical area is aspiration performed?

Please specify:

Please specify:

Emergency Department	
Admissions Unit / Inpatient Ward	
Operating Theatre	x
Radiology Department	
Other (please specify)	

9. What form of anaesthesia is most commonly used for the joint aspiration?

Procedural sedation and analgesia	
Local anaesthetic	
General anaesthetic	If sedation not appropriate in discussion with anaesthetist.

10. Which specialty is responsible for the initial aspiration of the joint?

Emergency Medicine		Trauma and Orthopaedics	x	Other (please specify)	
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11. Are any of the following investigations included in your paediatric guideline?

Serum Procalcitonin (PCT)	No
Synovasure Alpha Defencin test	No

12. Which antibiotic is used as the first-line treatment, assuming the patient has no drug allergies?

Cefotaxime if <5 years age, Flucloxacillin if >5yr

13. What is the first-line antibiotic when the patient has a known allergy to penicillin?

cefuroxime

14. Under which specialty are initially admitted?

Please specify:

patients with septic arthritis

Emergency Department	
Trauma and Orthopaedics	
Paediatrics	×
Rheumatology	
Other (please specify)	

15. What is your initial management of septic arthritis in children, excluding the hip joint?

IV antibiotics only	
Initial aspiration followed by IV antibiotics	y
Serial aspiration	
Joint washed-out arthroscopically	Wash out if pus on aspiration
Open wash-out	

16. What is your initial management of septic arthritis of the hip joint in children?

IV antibiotics only	
Initial aspiration followed by IV antibiotics	y
Serial aspiration	
Joint washed-out arthroscopically	
Open wash-out	If pus on aspiration

17. In your department, is adjuvant corticosteroid therapy routinely used in the treatment of septic arthritis?

Yes		No	×
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18. Is there a mechanism in your hospital (e.g. audit process) whereby missed cases of septic arthritis (or delayed diagnosis) are collected, for example, by examining readmission data?

Yes		No	×
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19. If so, please specify:

Please specify:

Septic Arthritis in Adults Questionnaire

This is the response from rheumatology; our local orthopaedics have also been asked to reply; they may answer differently.

1. Which hospital do you work at?

Dudley Group NHS Foundation Trust

2. How many adult patients with septic arthritis does your hospital manage in a month?

We do not routinely clinically code outpatient attendances, so cannot electronically extract the reason for attendance. During the 12 months 01/10/2017-30/09/2018 there were adult discharges (29 Inpatients) coded with ICD10 M009 (Pyogenic Arthritis) as either a primary or secondary diagnosis (average of 2.42 per month)

3. Does your department have a written guideline for the investigation and management of potential septic arthritis in adults?

Yes	✓
No	
Verbal Only	

4. Where is your guideline taken from? (For example, BSR, local guideline etc.)

British Society for Rheumatology

5. When septic arthritis is a differential diagnosis, what imaging is routinely requested?

Plain film radiographs of the joint	
CT	
MRI	
Ultrasound	
Other (please specify)	

Please specify:

Plain film always

6. When the diagnosis is unclear, what additional imaging requested?

CT	
MRI	
Ultrasound	
No additional imaging requested	
Other (please specify)	

Please specify:

Sometimes US to aspirate a joint if required.

Sometimes MRI

7. In a **native** joint, excluding the hip, where is joint aspiration commonly performed?

Emergency Department	
Admissions Unit / Inpatient Ward	

Please specify:

Usually the admissions ward/inpatient area

Operating Theatre	
Radiology Department	
Other (please specify)	

8. In suspected septic arthritis of the hip joint, where is joint aspiration commonly performed?

Emergency Department	
Admissions Unit / Inpatient Ward	
Operating Theatre	
Radiology Department	
Other (please specify)	

Please specify:
In the rheumatology joint injection clinic facility where it is done under US guidance, OR, in the radiology department

9. Which specialty is responsible for the initial aspiration of **native** joints, excluding the hip?

Emergency Medicine	√	Rheumatology	√
Trauma and Orthopaedics	√	Other (please specify)	

Please specify: aspiration needs to be done asap by however is competent

10. If different, which specialty is responsible for aspiration of the hip joint?

Emergency Medicine		Rheumatology	√
Trauma and Orthopaedics	√	Other (please specify)	

Please specify: rheumatology can do it under USS, or ortho may do it in theatre under x ray guidance

11. Are any of the following investigations included in your **native** joint guideline?

No, but we do use PCT sometimes (although, we have had cases of septic arthritis with a normal PCT, so it isn't always helpful)

Serum Procalcitonin (PCT)	
Synovasure Alpha Defencin test	

12. Are any of the following investigations included in your **prosthetic** joint guideline?

Not in the formal guideline, but could be used

Serum Procalcitonin (PCT)	
Synovasure Alpha Defencin test	

13. Which antibiotic is used as the first-line treatment, assuming the patient has no drug allergies?

Flucloxacillin and rifampicin

14. What is the first-line antibiotic when the patient has a known allergy to penicillin?

Vancomycin plus rifampicin

15. Under which specialty are patients with septic arthritis initially admitted?

Emergency Department		Rheumatology	
Trauma and Orthopaedics	✓	Other (please specify)	

Please specify:

16. If any, what is your first-line invasive treatment?

Joint aspirated to dryness, as often as necessary	
Joint washed-out arthroscopically	Y
Joint taken to theatre for open debridement	
Other (please specify)	

Aspiration of joint and sent for Microscopy / culture and sensitivity.

If pus or clinically suspicious the n Arthroscopic washout & proceed

17. In your department, is adjuvant corticosteroid therapy routinely used in the treatment of septic arthritis?

Yes		No	✓
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18. Is there a mechanism in your hospital (e.g. audit process) whereby missed cases of septic arthritis (or delayed diagnosis) are collected, for example, by examining readmission data?

Yes		No	✓
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19. If so, please specify:

Please specify: