

AMPUTATION MANAGEMENT

BLS ACTIONS/TREATMENT:

- If avulsed tissue is still attached, return to normal position and secure with moist saline dressing.
- Stop profuse bleeding with direct point pressure to site of bleeding.
- For bleeding that cannot be controlled by direct pressure, apply OCEMS approved tourniquet tightened incrementally to least amount of pressure required to stop or limit bleeding.
- Make every effort to retrieve all amputated parts and tissue.
- Rinse amputated part with normal saline solution to remove any gross contamination, then wrap in sterile saline moistened gauze.
- Place wrapped part inside a waterproof container, if available; utilize cold pack to keep container cold.
 - Amputated part / tissue should not be placed directly into ice (the melting ice produces a hypotonic solution that damages cells).
 - Do not use dry ice.
- Transport amputated part / tissue with patient.

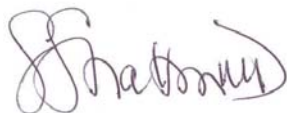
ALS ACTIONS/TREATMENT:

- BH contact as soon as possible for receiving center determination.

NOTES:

- The following should be transported to the nearest PTRC as directed by Base Hospital for replant evaluation:
Cleanly cut amputations to –
 1. Thumb – proximal to or at the interphalangeal (IP) joint (joint below the thumb nail).
 2. Multiple fingers proximal to the mid-phalanx (middle finger bone).
 3. Complete or partial hand.
 4. Upper extremity (shoulder to wrist).
 5. Amputation in a child (excluding finger pad avulsions).
 6. Penis.
- The following types of injuries do not meet replant triage criteria and are transported to the nearest PRC:
 1. Crush injury with amputation.
 2. Amputations at multiple levels (multiple amputations of same body part).
 3. Finger tip amputations.
 4. Single finger in the adult.
 5. Self mutilation with prior self mutilation attempts.
 6. Amputations greater than 6 hours old.
- Per this Guideline, amputations of the leg are not considered to meet replant criteria, but leg amputations at or above the knee should be considered for transport to the nearest trauma center for trauma stabilization.

Approved:



Treatment Guidelines: procedures: pr-15
Implementation Date: 3/17/08