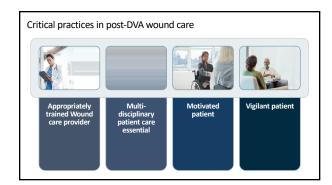


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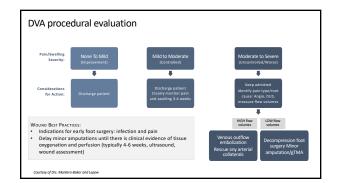


Strong communication amongst care teams a must

- AVOID aggressive debridement/amputations
- Early debridement (less than 4 – 6 weeks post-TADV) must be performed cautiously; debride only necrobic/infected tissue

- AVOID tourniquet use
- Vascular occlusion
- Hides ligated vessels

- AVOID proximal foot amputations; ideally should be mid-metatarsal
- may damage the lateral plantar vein, 1st metatarsal perforator and dorsal outflow tract
- AVOID primary wound closure in early TADV patients
- Utilize low-pressure (60 – 80mmilg) RVPIT when appropriate
- Prepare for bleeding and properly plan for post op dressings
- i.e.: use of coagulant products



	Post Procedure	Discharge/ 48hrs			3 Week				3 Month				
Angiogram	х												
MD Hand- Held/Blind Doppler	x	x	x	x	x	х	x	x	x				
Duplex		х		х		х	х	х	х	x	х	х	х
Pain	х	x	х	x	x	х	x	х	х	х	x		
Swelling	х	x	x	x	x	х	х	х	х	x	х		
Wound Status	x	x	x	x	x	х	x	x	x	x	x		