Transfemoral Amputation

Nerves:

Sciatic nerve
The sciatic nerve has already divided into the **tibial** nerve, the **peroneal** nerve and the **sural** nerve. These nerves are dissected proximally.

The tissue between the tibial and peroneal branches is dissected up to the common sciatic nerve.

The small sural branch is isolated as well.

Ligate nerve
The nerve is pulled distally to allow ligation with an absorbable suture. The sciatic nerve is quite large and has small vessels that can and do bleed. Ligation with an absorbable suture prevents this intra-operative and post-operative bleeding.

Cut suture
The suture is inspected and cut.

Divide nerve
The nerve is cleanly divided distal to the suture ligation.

Push nerve up proximally
The nerve must retract proximally to prevent the distal end of the sciatic nerve from becoming adherent to areas of scar and pressure. Using a finger helps assure that the nerve is not tethered and has indeed retracted proximally 5 to 10 centimeters from the level of the bone cut and flaps.

Sciatic nerve and branches
The sciatic nerve and its tibial, peroneal, and sural branches are shown.