

## Transfemoral Amputation

### Preop

42 year old male who sustained severe injuries in a motorcycle accident. Note: he is a previous renal transplant recipient and is on immunosuppressive treatments.

His injuries include:

- Open pelvis fracture
- Rectal Injury and need for diverting colostomy
- Mangling injury to left leg
- Disruption of the tibial and peroneal nerves
- Open knee joint and significant loss of soft tissue
- Partial loss of patella and of the patellar tendon
- Exposed and colonized tibia and knee joint

Continued salvage efforts were offered with a full discussion of the infection risks and possible impact of his immunosuppressive treatments. He and his wife asked us to proceed with above the knee amputation.

### Wounds

Pointing out the gluteal and peri-rectal wounds

### Exposed tibia

Pointing out the exposed tibia and loss of soft tissue

### Exposed knee joint

Loss of patella and patellar tendon

### X-rays

The significant fracture and how it was stabilized.

The pelvis fracture and the internal fixation used to stabilize the open pelvis fracture

### External fixator wounds

The wounds from the temporary external fixator: he already has early heterotopic bone and very dense scars palpable at the external fixator insertion sites.

### Irrigation

Irrigation of the gluteal and peri-rectal wounds.