

POSTERS

THURSDAY 28 NOVEMBER

21 – 21

~~A high index of suspicion is required when presented with rapidly developing compartment syndrome with no history of trauma in the presence of progressing sepsis. Prompt identification can be limb and life saving in this potentially catastrophic condition.~~

21. **Perceptions regarding correct pre-operative storage and transfer of amputated digits: a national experience**

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Background: Replantation of amputated body parts is a highly specialised, cost-intensive procedure and can offer significantly increased quality of life in selected cases. To optimise chances of successful replantation, appropriate preparation and transfer to the replantation centre is critical. In the absence of custom made devices for storage of the amputated part, pre-hospital preparation is often determined by the referring practitioner, prior to contact with the referring department.

This study has re-explored the perceptions of referring practitioners regarding correct pre-operative storage and transfer of amputated tissue to the Welsh Centre for Plastic Surgery, following an earlier national audit (2008).

Methods: A telephonic semi-structured survey of all referring units was conducted between November 2012 and February 2013, against Advanced Trauma Life Support guidelines as gold standard.

Results: A 78% response rate ($n=68$) was obtained from 90% of referring centres ($n=16$). Only 18% of respondents described the procedure correctly. Major concerns were storage directly on ice (10%) and abrasive trimming/cleaning solutions (56%).

Conclusion: This study not only underscores the importance of education and engagement of referring physicians, but also demonstrates that if applied alone, educational engagement reported in previous centres may be ineffective. A procedural chart, pre-mailed to all referring departments and made available to fax on demand is recommended as a simple and low-cost intervention. The results of the study also affirm the onus on plastic surgeons to engage in innovative and effective educational tools to improve microvascular and replantation service delivery.