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On 9/29/08 a 31 year old male presented to the trauma bay with a gunshot wound (GSW) to the left popliteal fossa. On exam the patient was found to have no palpable pulses in the left foot, with no sensation to touch and an inability to move the foot. X-ray revealed a comminuted distal femur fracture. The patient was taken to the OR where first Orthopedics rodded the fracture to stabilize it.

A posterior approach to the popliteal fossa was used to explore the artery and vein. The artery was found to be completely transected and the vein was found to be torn laterally. The artery was repaired with an interposition vein graft and the vein with a lateral venorrhaphy. Four compartment fasciotomy was done due to the ischemia time.



Day 1



Day 1

On 10/6/08 the patient was taken to the OR for closure of his fasciotomy sites. The medial wound was closed primarily but there was too much tension to close the lateral fasciotomy site. On 10/8/08 a DermaClose™ RC device was placed using the shoelace technique. The patient had no complaints of pain with the device in place.

On 10/13/08 the wound edges had fully approximated. The wound was closed primarily with 2-0 nylon vertical mattress sutures and the DermaClose™ RC device was removed.



Day 5



Day 5