

# 2019 NEHS Annual Meeting Abstract Submission

ABSTRACT TITLE *	Multidisciplinary Management of Complex Upper Extremity Trauma
Contact Person Name *	Neel Joshi
Contact Person Email *	
Contact Person Phone Number *	
Name of who will present abstract at NEHS meeting on December 6, 2019 Please note that the same person cannot present more than one abstract at the meeting. *	Neel Joshi
Please indicate if the presenter is: *	<ul style="list-style-type: none"><li>• Resident</li></ul>
List full names of abstract authors *	Neel S Joshi, MD Brian Wong Won, MD Georgios Mihalopoulos, MD Julia Perugini Alan Babigian, MD, FACS

**ABSTRACT – should include background information and a description of methods, programs, or practices. \***

Introduction: Functional limb salvage is a priority in the management of complex upper extremity trauma, both in patients with isolated extremity injuries and the multi-trauma patient. As such, patients frequently undergo multiple procedures in an effort to preserve viable tissue with an eye to eventual functional reconstruction. Optimal management of these patients requires involvement from multiple specialties.

Methods: Three cases of multi-trauma patients are presented, all managed by multiple specialties at a single institution. Clinical review and photographs documenting patients' recovery are presented.

Results: Each of the cases involved management by the trauma surgery/critical care, orthopedic, and plastic surgery teams. One case necessitated transfer from an outside hospital to our tertiary center where these specialties would be available. Length of stay ranged from 7 to 40 days (average: 25) and the patients underwent between 4 and 9 procedures (average: 6.3) relating to their upper extremity injuries during their admission.

Conclusions: Complex upper extremity trauma involving significant tissue loss typically requires the expertise of multiple services, including trauma/critical care, orthopedics, and plastic surgery. Often, facilitating multidisciplinary management by these services requires transfer of patients to a Level I trauma center. Communication among these multiple specialties is critical to a successful outcome. Early plastic surgery consultation aids in expediting coverage of the wound and will also allow for better coordination across operative services to preserve tissue that may be necessary for later reconstruction.
