Case Study Report

AVOIDABLE FASCIOTOMY

MY01

MY01 Continuous Compartment Pressure Monitor could have avoided an unnecessary fasciotomy

Treated at the Montreal General Hospital

Case Information

Age: 34 | **Sex:** Female | **BMI:** TBD

Mode of Injury:

Fall down 15 stairs, L radius segmental and L ulna midshaft fractures

MY01 Used:

Clinical Signs Present - Pain and nerve palsy - MY01 PreOp Monitoring

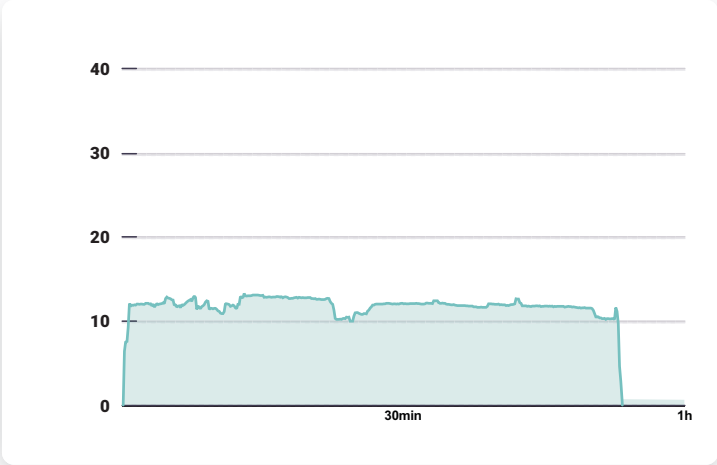
Case Outcome

Managing the risk of Compartment Syndrome with the MY01 Continuous Compartment Pressure Monitor enabled the orthopedic surgeon to appreciate the evolution of pressure in comparison with the clinical signs. Despite the pressure being low, the surgeon elected to perform a fasciotomy because of the presence of nerve palsy. The palsy had been present since the injury.

X-Ray of L radius segmental and L ulna midshaft fractures.

Clinical Presentation

A 34 year old female fell down 15 stairs and sustained a left radius segmental fracture and left ulna midshaft fracture- both closed. Although the compartments were soft, the patient was complaining of pain at the fracture site as well as a nerve palsy.



Management of Compartment Syndrome Risk

Given the patient's injury and injury mechanism development of compartment syndrome was likely. The clinical signs were pointing to a case of Acute Compartment Syndrome, as the patient reported both pain and nerve palsy of the left arm. The MY01 Continuous Compartmental Pressure Monitor was used and the pressures were measured for about an hour before the patient was taken to the OR. The muscle pressure remained low at ~15mmHg throughout the monitoring period. Although clinical signs and pressures were conflicting, the surgeon elected to perform a fasciotomy because of the presence of nerve palsy.

Pre operation.

Pre operation.

2 week follow-up.

6 weeks follow-up.

Outcome of Management and Follow-up

The patient was admitted to the OR for a fasciotomy that confirmed the presence of nerve damage. The patient did not have Compartment Syndrome. The nerve palsy was still present at the 6-week follow up.

Why this Patient was a Candidate for MY01 Continuous Pressure Monitoring

The injury mechanism and fracture pattern are typically associated with Compartment Syndrome. The clinical signs were contradictory with a questionable pain history leaving the treating Orthopedic Physician with limited options to rule out compartment syndrome. The MY01 Continuous Pressure Monitor enabled the treating Orthopedic Physician to monitor the patient's evolving condition. Although pressures remained low, the patient was taken to the OR but did not have Compartment Syndrome.

Source

This case was managed at a level 1 teaching facility in Montreal (Canada).

Note: In this publication, the underlying use of the MY01 Continuous Compartmental Pressure Monitor falls within the current indications for use of this device.

Note: The MY01 Continuous Compartmental Pressure Monitor is intended for real-time and continuous measurement of compartmental pressures. The measured compartmental pressures can be used as an aid in the diagnosis of Compartment Syndrome.

Rx ONLY Refer to IFU supplied with each device for indications, instructions, and precautions.

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