

CHARITE

ChariteCentrum for Surgical Medicine

Charite I Campus Benjamin Franklin 1 D - 12200 Berlin

Clinic for Vascular Surgery

Director: Prof. Dr. med. univ. Andreas Greiner

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Berlin, 17.06.2020 / LS

case no.: 0313569483

To the colleagues in charge of further treatment

Message:

2] Mr Elshan Kurbanov, Oktjabski 29, 00000 Gardabani / Georgia

Preliminary physician's letter

Information according to (§ 23 (8) Infection Protection Act: no multi-resistant pathogens detected

Dear Colleague, dear Sir, we report to you about our common patient

**Mr Elshan Kurbanov, born on: 12. April 1999,
resident: Oktyabski 29, 00000 Gardabani / Georgia,**

who was in our inpatient treatment from 24. February 2020 to 16. June 2020.

Diagnostics:

- Prolonged ischemia after crush injury of the left ankle with occlusion of the three lower leg arteries as well as comminuted fracture of the tibia and fibula - External plate osteosynthesis

Therapy:

24. February 2020: Application of a popliteocrural bypass with V. saphena magna reversed on the arteria tibialis posterior, selective bypass on the arteria dorsalis pedis also with the vena saphena magna reversed. Intraoperative control angiography.

Wound debridement in the area of the lower leg and application of a vacuum system. The access to the arteria dorsalis pedis is covered with Mepitel

To date: vacuum dressing therapy with dressing changes every 5 - 7 days Removal of the lateral VAC on 15. June 2020

**Medication on admission:
none**

Medical history and findings:

Mr Kurbanov presented himself for emergency admission to hospital on 24. February 2020. In Poland, a car rolled over his foot while changing a tire. Now he presented himself with a crush injury of the left foot with a comminuted fracture of the tibia and fibula. This had already been treated with plate osteosynthesis in Poland. All vessels of the lower leg were broken off with prolonged ischemia, which is why the indication for lower leg amputation was given in Poland. The patient presented himself to us with the request to save his foot.

Reason for admission:

Injury to several blood vessels at the level of the ankle (S95.7)

Recording status:

Therapy and course:

On 24. February 2020 we carried out the above mentioned procedure. Postoperatively, some large soft tissue defects appeared on the lower leg and the back of the foot. Especially these on the medial and lateral lower leg, where the osteosynthesis plates were located. During long therapy with VAC the lateral side granulated well, so that finally on June 15th the lateral VAC could be removed. Medially, a very slow healing tendency was observed, so that we consulted our colleagues in plastic surgery. Healing of the fracture is also very slow, and colleagues from trauma surgery are currently considering replacing the osteosynthesis plates with an external fixator.

The laboratory parameters took an unremarkable course. Peripheral circulation, motor function and sensitivity were intact. The complete mobilisation was achieved without any problems under physiotherapeutic supervision.

We transfer Mr Kurbanov to the Charite Campus Virchow Klinikum for further treatment

Recommended / provided medication on discharge:

See AiD

Recommendations / Procedure:

- Further therapy with VAC
- Consultation with trauma surgery for further treatment of the fracture
- Consultation with colleagues of plastic surgery for planning coverage

The patient received a medication plan Yes ☐ No ☐

In order to ensure the continuity of supply, the following were issued as part of the discharge management

Regulations issued:none

Subsequent care facility: Charite Campus Virchow Klinikum Provided

findings: Transfer report

If you have any questions, please do not hesitate to contact us at the telephone numbers mentioned in the letterhead or at the responsible station support number 450-652153.

We are happy to offer a reappearance in the vascular surgery consultation hours (Vascular Center, ground floor, at elevators 13, 14 or 15), or in case of deterioration via the emergency room at any time,

thank you for the friendly further treatment and remain with kind

collegial greetings

Prof. Dr. med. univ. A. Greiner
Director of Vascular Surgery

PD Dr. med. I. Hinterseher
Senior Physician

L. Schawe
Assistant physician

CHARITE

ChariteCentrum for Surgical Medicine

Charite I Campus Virchow Clinic I D - 13344 Berlin

To the colleagues providing further treatment

Department of Vascular

Surgery Campus Virchow

Clinic Director of Vascular

Surgery:

Prof. Dr. med. univ. Andreas Greiner

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e-mail : gefaesschirurgie@charite.de

Berlin, 06.08.2020 / ra

Case no.: 0313569483

Message: Mr Elshan Kurbanov, Oktyabski 29, 00000 Gardabani / Georgia

Provisional doctor's

Information according to (§ 23 (8) Infection Protection Act: no multi-resistant pathogens detected

Dear Colleague, dear Sir, we report to you about our common patient

Mr Elshan Kurbanov, born on: 12. April 1999, resident: Helperstr. 3, 13189 Berlin,

who was in our inpatient treatment from 24. February 2020 to 06. August 2020.

Diagnostics:

- Prolonged ischemia after crush injury of the left ankle with occlusion of the three lower leg arteries as well as comminuted fracture of the tibia and fibula - external plate osteosynthesis

Therapy:

24. February 2020: Application of a popliteocrural bypass by means of V. saphena magna reversed on the arteria tibialis posterior, selective bypass on the arteria dorsalis pedis also with the vena saphena magna reversed. Intraoperative control angiography.

Wound debridement in the area of the lower leg and application of a vacuum system. The access to the arteria dorsalis pedis is covered with Mepitel

To date: vacuum dressing therapy with dressing changes every 5 - 7 days Removal of the lateral VAC on 15. June 2020

Medical history and findings:

Mr Kurbanov presented himself for emergency admission to hospital on 24. February 2020. In Poland, a car crashed on his foot while changing a tire. Now he presented himself with a crush injury of the left foot with a comminuted fracture of the tibia and fibula. This had already been treated with plate osteosynthesis in Poland. All vessels of the lower leg were broken off with prolonged ischemia, which is why in Poland the indication for

Station: 18

(030) - 450 652 153 Fax:

(030) - 450 552 944

Vascular consult:

Mon - Thu 08.30 - 16.00

Ms. 08.30 - 15 00 hours

Appointment allocation

under: Phone: (030) 450 -

652 013 Fax: (030) 450 -

7552946

Private consultation:

Tel: (030) 450 - 522 725

by appointment

for a transtibial amputation. The indication for surgical revascularization was interdisciplinary.

Reason for admission:

Traumatic injury to the left lower leg (S95.7)

Therapy and course:

On 24. February 2020 we carried out the above mentioned procedure. Postoperatively, some large soft tissue defects appeared on the lower leg and the back of the foot. Especially these on the medial and lateral lower leg, where the osteosynthesis plates were located. During long therapy with VAC the lateral side granulated well, so that finally on June 15th the lateral VAC could be removed. Medially, a very slow healing tendency was observed, so that we consulted our colleagues in plastic surgery. Healing of the fracture is also very slow, and colleagues from trauma surgery are currently considering replacing the osteosynthesis plates with an external fixator.

Recommendations / Procedure:

- Further therapy with VAC - followed by open wound treatment
 - Consultation with trauma surgery for further treatment of the fracture using an external fixator
 - Consultation with colleagues of plastic surgery for planning coverage

with kind collegial greetings,

Prof.Dr.med. A. Greiner
Director of the clinic

J. Frese, M.D.
Senior physician

B. Rough
Assistant physician

Roelke Hill

