

Amputation (Adult and Pediatric)

CFR AND ALL PROVIDER LEVELS

1. Refer immediately to the Bleeding / Hemorrhage Control / Impaled Object (Adult and Pediatric) protocol, as indicated.
2. ABCs and vital signs.
3. Elevate and wrap the stump with moist sterile dressings and cover with dry bandage.
4. Consider spinal motion restriction, refer to the Head, Neck, and Spine Injuries (Adult and Pediatric) protocol.
5. Provide or direct care for amputated part:
 - a. Moisten sterile dressing with sterile saline solution and wrap amputated part.
 - b. Place the severed part in a water-tight container, such as a sealed plastic bag.
 - c. Label the bag with the patient's name and time of the injury.
 - d. Place this container on ice or cold packs, using caution to avoid freezing the limb.

● CFR STOP

EMT

6. Transport to the nearest appropriate hospital according to the patient's condition.

● EMT STOP

Paramedic

● Paramedic STOP

Key Points / Considerations

1. Distal amputations (those distal to wrist or ankle) do not typically require a trauma center.
2. Transport the amputated part with the patient, if possible, but do not delay transport to search for amputated part.
3. Consider contacting Online Medical Control for consultation if there is uncertainty regarding appropriate destination facility.