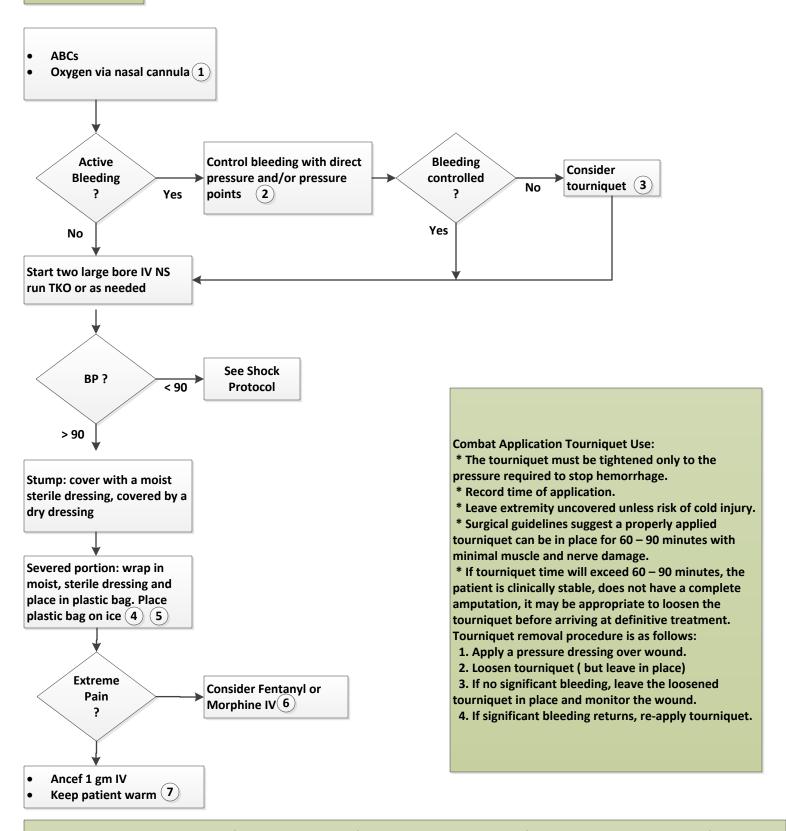
Amputation



- 1. Administer higher concentrations if needed. Use a NRM if active bleeding is present or if the original blood loss was significant.
- 2. Use pressure point proximal to site if direct pressure does not control the bleeding
- 3. A tourniquet may be indicated
- 4. Keep severed portion moist. Do not allow to soak in a solution.
- 5. If transport is delayed or otherwise extensive (entrapped patient, etc) consider transporting severed part before patient, to allow early examination and surgical preparation for reimplantation.
- 6. May cause hypotension
- 7. History: note time of amputation, mechanism involved, current medications.