

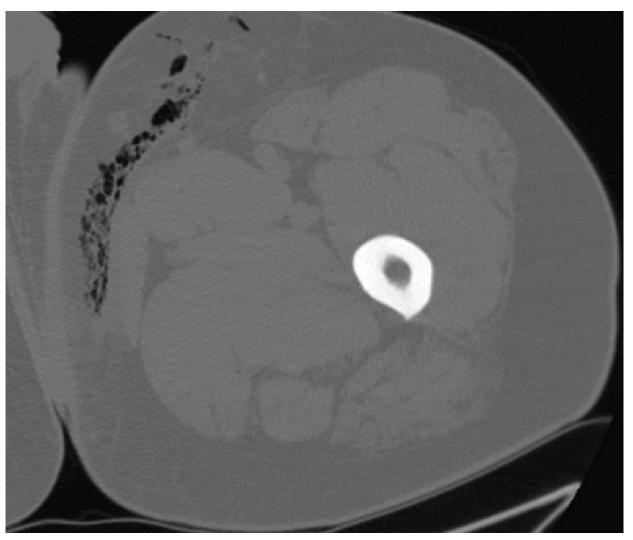


53-year-old M w/PMH uncontrolled diabetes mellitus II, abscesses, presented to VA ED with 4 days of thigh swelling.

- Vital signs: Tachycardic (120), normotensive, afebrile

- **Imaging:** CT Lower extremity





- operative debridements
- POD 10 final debridement
- POD 26 STSG: 1.5:1 meshed graft
- >90% viability

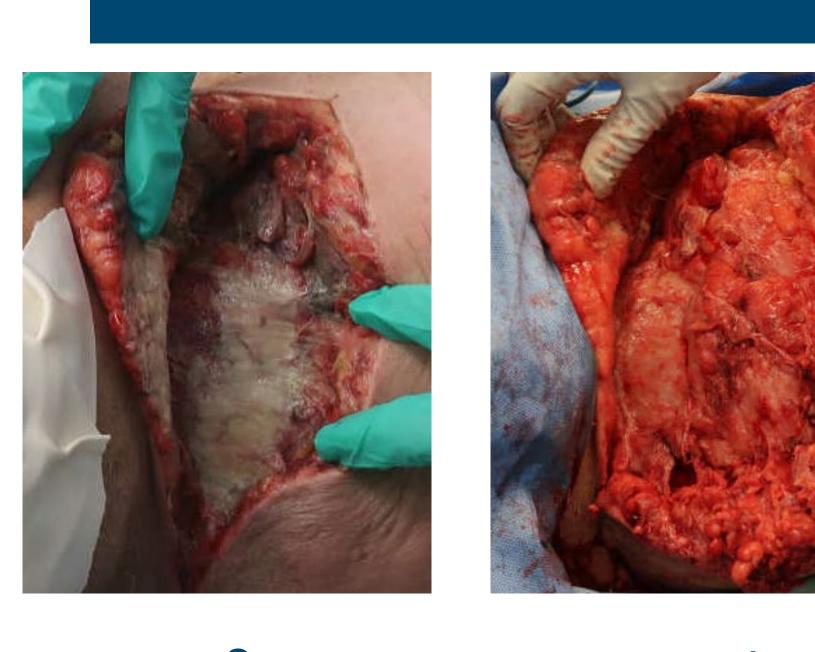
*All photographs were de-identified and obtained with written and verbal consent from the Veterans Affairs regulations for publication and educational dissemination.

Surgical Management of a Rare Clostridial Necrotizing Soft Tissue Infection at a Veterans Affairs Medical Center: **A Cinderella Story**

Haley A. Zlomke M.D., David Countryman M.D., Margaret Dorlon M.D.

CASE DESCRIPTION

Physical exam: Erythema, induration, tenderness to left anteromedial thigh Notable lab values: WBC (20), Hb (12), Na (132), Cr (2.1), glucose (419), CPK (47) CRP (46), ESR (104), lactate (2.89), HbA1C (7.3), LRINEC (11)









- **Assessment & plan:**
 - Clindamycin, piperacillin-tazobactam, vancomycin
 - Emergent surgical debridement
 - **ICU** Admission
 - Insulin drip
- Intraoperative cultures: Clostridium ramosum, Enterococcus faecalis, Parabacteroides



CONCLUSIONS

- NSTI's are a surgical emergency
- "Necrotizing Fasciitis Team"
- Non-trauma center
- High-risk patient
- Rare, previously fatal, Clostridium ramosum infection