

TEMPORARY VASCULAR SHUNT

1. Assess
 - a. Casualty resuscitation
 - b. Tactical constraints
 - c. Limb viability, neurologic injury
 - d. Vascular injury & distal perfusion post clamping
 - e. Requirement for external skeletal fixation
2. Prepare vasculature
 - a. Wound exploration and debridement
 - b. Obtain proximal & distal control
 - c. Embolectomy if necessitated
3. Prepare shunt
 - a. Diameter: $\leq 2/3$ vessel lumen
 - b. Length: Defect + docking length \pm extravascular loop
 - c. Place 0 Silk marker handle in centre of shunt
 - d. Bevel ends avoiding sharp edges
 - e. Clamp distal end of shunt
4. Place shunt
 - a. Pass shunt proximally & test flow
 - b. Pass shunt distally & secure both ends with 0 Silk
 - c. Assess distal limb perfusion
 - d. Prophylactic fasciotomy if ischaemia time > 4 hours
5. After Care
 - a. Shunt can remain in situ 48 hours
 - b. Anticoagulation is not required
 - c. Dressings to enable visualisation of shunt
 - d. Reassess shunt patency & distal pulse Q6H
 - e. Caution: Compartment syndrome