

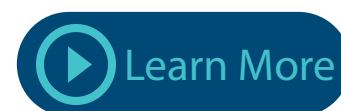
Acute Limb Ischemia (ALI) Protocol

Assessment and Indications

- ▶ Report of one or more of the following
 - ▶ Ischemia rest pain
 - ▶ Pulselessness in affected limb
 - ▶ Pallor
 - ▶ Paresthesia
 - ▶ Poikilothermy (coldness)
 - ▶ Gangrene
- ▶ Diagnostics to include bilateral lower extremity arterial duplex and bilateral ankle-brachial index & toe-brachial index

Initial Management

- ▶ Contact Minneapolis Heart Institute® at 612-863-3911 for Acute Limb Ischemia consult
- ▶ Activate emergency transport team via fastest route possible
- ▶ NPO, monitor, 12 lead EKG, 2 IVs with NS at TKO, draw labs
- ▶ Aspirin: 324 mg PO (81 mg chewable tabs X 4) OR 300 mg PR
- ▶ Heparin: 80 U/kg (max 10,000 U) IVP, loading dose then 18 U/kg/hr (max 2,500 U/hr) continuous infusion
- ▶ Oxygen: to maintain SpO2 ≥ 92%



"Guidelines are not meant to replace clinical judgment or professional standards of care. Clinical judgment must take into consideration all the facts in each individual and particular case, including individual patient circumstances and patient preferences. They serve to inform clinical judgment, not act as a substitute for it. These guidelines were developed by a Review Organization under Minn. Stat. §145.61 et. seq., and are subject to the limitations described at Minn. Stat. §145.65."

This information is intended only as a guideline. Please use your best judgment in the treatment of patients.