

Necrotizing Fasciitis

High likelihood of MSK infection with sepsis or necrotizing fasciitis

- History, Exam
- Lab work: (CBC with Differential, Blood Culture, ESR and CRP)
- Administer antibiotics: (vancomycin, clindamycin, and cefepime)
- Consult Orthopedics immediately
- Initiate the Septic Shock Clinical Pathway

Necrotizing fasciitis

- Swollen limb with pain out of proportion history or exam
- Frequently with overlying warmth on palpation, +/- cellulitis or ecchymosis
- Surgical emergency: debridement in OR necessary
- Consult Infections Diseases, Orthopedics immediately
- Do not delay to perform MRI
- Antibiotics per Infectious Disease Consultant

These guidelines do not establish a standard of care to be followed in every case. It is recognized that each case is different and those individuals involved in providing health care are expected to use their judgment in determining what is in the best interests of the patient based on the circumstances existing at the time. It is impossible to anticipate all possible situations that may exist and to prepare guidelines for each. Accordingly these guidelines should guide care with the understanding that departures from them may be required at times.