

TEMPLE LIMB SALVAGE CENTER



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Limb-threatening ischemia or infection is a complicated clinical challenge. Preventing amputation requires urgent interdisciplinary action. It also calls for expertise with the most aggressive endovascular interventions plus knowledge of emerging investigational therapies. To meet this challenge, Temple has gathered top specialists from across clinical divisions to create the Limb Salvage Center.

The Temple Limb Salvage Center is the region's first tertiary-level program dedicated solely to preventing lower extremity amputations in high-risk patients with diabetes or other vascular pathologies.

We provide limb-saving procedures and some of the newest vascular rescue therapies for patients with complex wounds or high-grade ischemia. We offer:

- Advanced endovascular/vascular and open surgical procedures
- Excellence in complex revascularizations and reconstructions of limbs
- Novel drugs, biologicals, and devices for vessel, bone, and tissue repair
- Investigational therapies (e.g., neoangiogenesis, gene therapy, stem cells)

Our multidisciplinary team includes top-rated vascular and endovascular surgeons, podiatrists, diabetologists, cardiologists, plastic surgeons, infectious disease specialists, orthopedic surgeons, neurologists, nephrologists, interventional radiologists, physical therapists, nurse practitioners, educators, and medical assistants.

Prompt referral of a high-risk patient to a multispecialty tertiary-level group can prevent a needless amputation.

Specific RED FLAGS of impending risk for lower extremity amputation—and triggers for immediate referral—may include:

- Gangrene, necrosis, severe pain, or other classic indications for amputation
- Ischemia and/or nonhealing wound due to diabetes, PAD, or other conditions
- Diabetic foot infection classified as moderate or severe (esp. w/ fever)
- Possible or definite osteomyelitis in a diabetic foot
- Wound/ulcer in a patient with diabetes or PAD and risk factors such as renal failure, low cardiac output, limb edema, or current smoking history
- If skin or bone is badly infected, if an ulcer has not healed after 3–6 weeks of specialized wound care, or if circulation is extremely poor, prompt action may be required to prevent amputation.

WHEN TO REFER

The Limb Salvage Center specializes in treating patients with peripheral vascular problems or ischemia who are at high risk of amputation due to a worsening, nonhealing, and/or infected wound. Most patients referred here have diabetes or other vascular pathologies such as peripheral arterial disease (PAD), pressure sores, bone infections, poor circulation (e.g., Raynaud's phenomenon), edema, radiation injury, surgical wounds, post-oncology or post-injury arterial or venous damage.

SERVICES

At the Limb Salvage Center, patients get immediate evaluation and access to the optimal array of diagnostic and therapeutic services for limb preservation. A plan for therapy is quickly customized for each patient based on underlying pathophysiologies (e.g., neuropathies, infection, biomechanics, metabolic and immunologic status) and individual patient factors (e.g., age, weight, comorbidities, lifestyle, mobility/vision, social support). Beyond conventional wound assessment and management services, we provide:

Evaluation

- Hemodynamic, anatomic, and functional vascular assessments
- Advanced imaging (e.g., CT angiography, MRI, radionuclide scan)
- Neurological, metabolic, and microbiological assessments

Advanced Procedures and Therapies

- Minimally invasive revascularization with balloon angioplasty, laser, and stents
- Traditional (open) surgical bypass and foot-sparing partial amputations
- Reconstruction of Charcot neuroarthropathy and other foot/ankle deformations
- Grafting, including use of bioengineered skin and alternative tissues
- Investigational therapies (e.g., neoangiogenesis, bone marrow stimulation, gene therapy, stem cells, and other biological therapies)

Follow-up

In close coordination with referring primary physicians, podiatrists, wound specialists, and other providers, our clinicians and staff remain involved in the long-term surveillance and rehabilitation needed to ensure healing and avoid recurrences of ischemia.

To refer a patient to the Temple Limb Salvage Center or for more information, call 215-707-LIMB (5462).

Physician Liaison Service

The Temple Limb Salvage Center's dedicated physician liaison is always available to assist you with the needs of your patients requiring specialty services or advanced care. The Limb Salvage Center Liaison will immediately:

- Eliminate access barriers to hospital services
- Facilitate scheduling of complicated cases
- Coordinate ongoing communication with Temple physicians and staff
- Distribute information about clinical trials and other research programs available
- Arrange physician-to-physician in-service lectures and clinical updates at your office
- Resolve problems and answer questions efficiently and effectively

PHYSICIAN LIAISON

Gregory Morenko

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OFFICE LOCATIONS

For patient convenience, Temple Vascular & Endovascular Surgery has three physician office locations.

TEMPLE UNIVERSITY HOSPITAL

Temple Heart & Vascular Institute
3509 North Broad Street
4th Floor – Boyer Pavilion
Philadelphia, PA 19140

P: 215-707-6144 F: 215-707-5901

TEMPLE UNIVERSITY HOSPITAL – JEANES CAMPUS

Physicians Office Building, Suite 200
7500 Central Avenue
Philadelphia, PA 19111

P: 215-728-3240 F: 215-728-4283

TEMPLE UNIVERSITY HOSPITAL – NORTHEASTERN CAMPUS

2346 East Allegheny Avenue
Chachkin Pavilion, Suite 190-C
Philadelphia, PA 19134

P: 215-707-6144 F: 215-707-5901

Heart & Vascular Institute



Temple Health refers to the health, education and research activities carried out by the affiliates of Temple University Health System (TUHS) and by the Lewis Katz School of Medicine at Temple University. TUHS neither provides nor controls the provision of health care. All health care is provided by its member organizations or independent health care providers affiliated with TUHS member organizations. Each TUHS member organization is owned and operated pursuant to its governing documents.

Non-discrimination notice:

It is the policy of Temple University Hospital, Inc., that there shall be no exclusion from, or participation in, and no one denied the benefits of, the delivery of quality medical care on the basis of race, ethnicity, religion, sexual orientation, gender, gender identity/expression, disability, age, ancestry, color, national origin, physical ability, level of education, or source of payment.