

Administrative data

Were there any injuries in the past? Yes, No

If yes, What was it?

I. <u>Physical examination of the injured limb(s)</u>

I.1. Vascular

- O2 Saturation of the injured lim was measured: Yes, No

If yes: (0-100)

- radial pulse was measured on the injured limb: Yes, No
 If Yes,
 - Palpable,
 - Not palpable with definite micro circulation (pulseless pink hand) PPH
 - o US doppler
 - o CT angio
 - o no investigation
 - Not palpable with poor micro circulation (capillary refill time) CRT<3 sec
 (pulseless white hand) PWH
 - o US doppler
 - o CT angio
 - o no investigation

I.2. Neural

- Examination of the hand: Yes, No

If yes,

- Can not be objectively evaluated due to pain
- Complete/Total function
- Radial nerve dysfunction
- Ulnar nerve dysfunction
- Median nerve dysfunction



- VAS score Yes/NO/ no data

Investigation

Control investigation: Yes/No/No data

1. X-ray examination AP, lateral

2. CT scan: yes, no

Complication: Yes/No/No data

Vascular Yes/No/No data

Neural Yes/No/No data

Osteogen Yes/No/No data

Yes: Rotation disorder Yes/No/No data

Cubitis varus Yes/No/No data

If Yes: Reoperation: Yes/No/No data

Others:

Reoperation/reconstruction? Yes/No/No data