A 50 years old man presented to ED with the complaint of the wound on his right foot which he sustained on broken glasses yesterday. He has a history of T2DM but is not complaint with his regular medications. He was put in FT as Cat 3 and has been waiting to be seen. Two hours later, the triage nurse called you as he looks so unwell. His temp is 39.5’C, BP 90/60, RR 25, HR 120 and sPO2 96%RA. X ray of his right foot was taken.



1. Give two abnormality findings on the X ray provided. (2 marks)

* marked soft tissue swelling and liner streaks of gas in the soft tissue of the dorsum of the foot

1. What is the likely diagnosis? (1 mark)

* necrotizing fascitis of the right foot

1. What are the usual causative organisms? (3 marks)

- Clostridium

- E coli

- Strep pyogenes

- Bacteroides

1. Outline your management for this patient. (4 marks)

* Full monitoring on the patient, put 2xIVC, start fluid resuscitation (eg: 1L of 0.9% Normal saline stat) aiming for SBP >90mmHg, HR <100, UO 0.5ml/kg/hr, perform FBC, UEC, CRP, Blood cultures
* Give broad-spectrum antibiotics :

> meropenem 1g (children: 25 mg/kg up to 1g) IV 8hourly

> clindamycin 600 mg (children: 15 mg/kg up to 600mg) IV 8 hourly

> for suspected MRSA infections add vancomycin 1.5g IV 12 hourly

* Provide adequate analgesia (eg: IV fentanyl 25 mcg and titrate accordingly)
* Urgent surgical referral for wound debridement, urgent ICU review if the patient remains unwell despite resuscitative measures.