## APPENDIX E: OPERATIVE NOTE TEMPLATE

1.	Patient	2. Surgeon
3.	Date of Surgery	4. Anesthesia
5.	EBL:	6. Tubes
7.	Specimens	8. Complications
9.	Implants, Devices	
10.	Indication for operation: a. Established compartment syndrome (therapeutic) b. Risk of compartment syndrome developing (prophylactic)	
11.	<ul> <li>Preoperative wound appearance:</li> <li>a. Size (volume of damaged tissue: large surgeon hand ~500ml)</li> <li>b. Depth, location, contamination material or matter</li> </ul>	
12.	Preoperative imaging findings: a. Soft tissue injury seen & fracture	
13.	<ul> <li>Examination under anesthesia, fluoroscopy, and surgical exploration findings: <ul> <li>a. Distal pulse status</li> <li>b. Wound size, depth, location, contamination, materials or matter; burn eschar location and depth</li> <li>c. Vessel status, pulse, limb perfusion, capillary refill, congestion, edema, color of skin, warmth</li> <li>d. Clot presence, intravascular or extra vascular site, size (volume), location</li> <li>e. Hematoma presence</li> <li>f. Compartment hardness: soft, hard</li> <li>i. Epimysiotomy (if done by muscle name or compartment if known)</li> <li>ii. Retinaculotomy (if done by name, e.g., partial proximal ankle extensor</li> <li>iii. Retinaculotomy extended from anterior leg compartment fasciotomy</li> <li>iv. Result of fasciotomy and procedure (distal perfusion and pulse; gap in fasciotomy edges on release in cm; bulging out of muscles in compartment)</li> <li>v. Compartments soft or hard</li> <li>vi. Muscle color, consistency, contractility, capacity to bleed</li> </ul> </li> </ul>	
14.	Patient condition, status, disposition and p	lan.
15.	Key note for air evacuation: "Patient has be had progression of signs or symptoms of co	een monitored for X hours after injury/surgery and has no ompartment syndrome."