

# Necrotizing Fasciitis

Bacterial infection of subcutaneous tissue that spreads rapidly through the fascial planes causing extensive tissue destruction



## Clinical Presentation

### Step 1:

- erythema
- swelling
- warmth
- tenderness beyond erythema

### Step 2:

- bullae
- blisters
- fluctuance

### Step 3:

- hemorrhagic bullae
- crepitus
- necrosis
- gangrene

### KEY FINDING

**pain out of proportion to exam**

Late stage dx can cause sepsis, toxic shock, and multiorgan failure

## Evaluation/Diagnosis

### 1. Clinical suspicion\*



### 2. Radiology (+/- gas)



### 3. LRINEC Score >6

PPV 92%

NPV 96%



Factors of LRINEC score		Points
CRP (mg/l)	<150	0
	≥150	4
Leucocytes ( $\times 10^9/l$ )	<15	0
	15-25	1
	>25	2
Hemoglobin (g/dl)	>13.5	0
	11-13.5	1
Sodium (mmol/l)	<11	2
	≥135	0
Creatinine (mmol/l)	<135	2
	≤141	0
Glucose (mmol/l)	>141	2
	≤10	0
	>10	1

If there is high suspicion based on history and physical exam, **do NOT** calculate a LRINEC score

## Management

\*\*\*Surgical debridement\*\*\*

Broad spectrum IV antibiotics

Supportive care

