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Abstract

Kornbluth ID, Freedman MK, Sher L, Frederick RW. Femoral, saphenous nerve palsy after tourniquet use: a case report.

Persistent motor and sensory abnormalities after surgery may affect the rehabilitation process. Patients with continued weakness may be perceived as lacking motivation by health care providers. However, there may be an underlying pathophysiologic abnormality preventing patients from progressing through their rehabilitation programs. We report a case of a 20-year-old man who underwent surgical repair of multiple knee structures with the use of a pneumatic tourniquet. Several weeks after surgery, electromyographic evaluation was done because he was having difficulty in his rehabilitation because of persistent weakness. An electromyography and nerve conduction study (NCS) revealed femoral and saphenous nerve palsies. Our report is the first on tourniquet-induced saphenous nerve injury as well as on abnormal femoral NCSs caused by tourniquet use. A review of the literature indicates that tourniquet-induced nerve palsies are not a rare event. Further evaluation should be considered if patients who are having persistent weakness or sensory findings after surgery have used a tourniquet.

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