#### Why Do Patients Prefer AI3

Advanced Imaging and Interventional Institute is the Tampa Bay Area's first and most advanced *OUTPATIENT* center for Interventional Radiology and Vascular Specialties

- No Over Night Hospital Stays Patients will return to the comfort of their own homes the same day of procedures
- Less Costly The services that AI3 provides are much less expensive than the same procedures done in a hospital setting and provide a real financial savings. This could make a difference in hundreds of dollars for personal medical expenses from co-pays and deductibles
- State-Of-The-Art Equipment The interventional suite at AI3 has equipment which is more advanced than most hospitals in the Tampa area and is a national show site for General Electric Corporation
- Special Care and Patient Education Patients receive extensive education from the medical staff to learn more about themselves and medical conditions
- Highly Qualified Physicians All of our doctors are board certified Vascular Interventional Radiologists. Dr. Jerry is the present Chairman of the Economics Committee SIR and has been providing a major role in training standards for physicians performing Interventional Radiology
- Less likely to become ill from infectious disease – 5% of all hospital inpatients acquire an infection of some kind during their stay, according to the US Department of Health and Human Services.



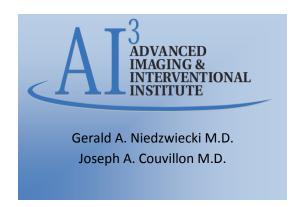
Advanced Imaging and Interventional Institute (AI3) is the first and most advanced Interventional Radiologist and Vascular Specialist outpatient center in the Tampa Bay area. AI3 offers a full range of diagnostic imaging and minimally invasive outpatient procedures and is wholly owned and staffed by Board certified and fellowship trained radiologist,

Dr. Gerald Niedzwiecki M.D.

# Advanced Imaging and Interventional Institute

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## **Diabetic Foot Ulcers**



Minimally Invasive
Treatment for Diabetic
Foot Sores

#### **Diabetic Foot Ulcer**

A diabetic foot ulcer is an open sore or wound that most commonly occurs on the bottom of the foot in approximately 15 percent of patients with diabetes. Diabetes is the leading cause of non-traumatic lower extremity amputations in the United States, and approximately 14 to 24 percent of patients with diabetes who develop a foot ulcer have an amputation.

Anyone who has diabetes can develop a foot ulcer. People who use insulin are at a higher risk, as are patients with diabetes-related kidney, eye. and heart disease. Being overweight and using alcohol and tobacco also play a role in the development of foot ulcers.

A Diabetic Foot Ulcer needs to be seen by a Vascular Specialist to test for proper blood flow. Not being treated properly can lead to amputation

### **Preserving Limbs Is Our Priority**

Have you been told that you are at risk for limb amputation? You have options — and the Coastal Vascular Specialists Amputation Prevention Center in Clearwater Florida is here to help.

#### **Facts About Amputation**

- 90% of all amputations are lower extremity
- 77% Males
- 3 million amputees in United States, estimated
- #1 cause vascular
- 50% of vascular amputations are caused by Diabetes
- 80% of diabetic amputations are over
   50 years old
- Majority of Diabetic amputations are preventable
- 50% of all amputations never had an angiogram (an X-ray test that uses a special dye and camera (fluoroscopy) to take pictures of the blood flow in an artery)

An *angiogram* can find a bulge in a blood vessel (aneurysm). It can also show narrowing or a blockage in a blood vessel that affects blood flow. An angiogram can show if coronary artery disease is present and how bad it is.

*Ulcers* form due to a combination of factors, such as lack of feeling in the foot, poor circulation, foot deformities, irritation, and trauma (ex. wearing tight shoes). Patients who have diabetes for many years can develop neuropathy, a reduced or complete lack of feeling in the feet due to nerve damage caused by elevated blood glucose levels over time. The

nerve damage often can occur without pain and one may not even be aware of the problem.

The primary goal in treatment of foot ulcers is to obtain healing as soon as possible. The faster the healing, the less chance for an infection.

There are several key factors in the in the appropriate treatment of diabetic foot ulcer:

- See a Vascular Specialist, A Wound Care Specialist and a Podiatrist
- Prevention of infection
- Taking the pressure off the area
- Removing dead skin and tissue
- Applying medication or dressing to the ulcer
- Managing blood glucose and other health problems

There are several important factors to keep an ulcer from becoming infected:

- Keep blood glucose levels under tight control
- Keep the ulcer clean and bandaged
- Cleanse the wound daily, using a wound dressing or bandage
- Do not walk barefoot

Healing time depends on a variety of factors, such as wound size and location, pressure on the wound from walking or standing, swelling, circulation, blood glucose levels, wound care, and what is being applied to the wound.

Healing may occur within weeks or require several months.