

**SDC1.** Summary of 39 cases.

	Age	Source of Immobility	PS Location	SPINE Protocol: LE Surgical Joint Contracture Release	SPINE Protocol: UE Tendon Transfer	Colostomy	Nutrition Augmentation	Pressure Relief Resources	Recurrence
1	65	Traumatic SCI, Tetraplegia	B Ischial, Sacral	Yes	Yes	No	HPHC, Protein shakes	IWV, Air Fluidized Bed, Mattress overlay	None, released from service.
2	53	Traumatic SCI, Paraplegia	Sacral	No	N/A	Yes	HPHC, Protein shakes	IWV, Air Fluidized Bed, Mattress overlay	Recurrence at 10 months.
3	57	Traumatic SCI, Paraplegia	L Ischial, L Troch	No	N/A	Yes	<b>Oxandrolone</b> Protein shakes General diet	IWV, Mattress overlay	None, released from service.
4	63	Traumatic SCI, Paraplegia	B Ischial, B Troch	No	N/A	Yes	HPHC, Protein shakes	IWV, Air Fluidized Bed, Mattress overlay	Recurrence at 2 years.
5	38	Traumatic SCI, Paraplegia	L Ischial	No	N/A	Yes	Low protein (renal diet)	IWV, Mattress overlay	None.
6	66	Parkinsons, dementia, immobile	L Troch	No	N/A	No	General diet	IWV, Mattress overlay	Dehiscence at 1 month due to fall.
7	54	Traumatic SCI, Paraplegia	Sacral	No	N/A	Yes	General diet	IWV, Air Fluidized Bed, Mattress overlay, Air-cell wheelchair cushion	None.
8	67	Advanced MS	L ischial	No	N/A	Yes	HPHC	IWV, Mattress overlay	None.
9	32	Traumatic SCI, Paraplegia	L Ischial	No	N/A	No	HPHC, Protein shakes	IWV, Air Fluidized Bed, Mattress overlay, Air-cell wheelchair cushion	None, released from service.
10	64	Advanced MS	R Ischial	No	N/A	No	HPHC, Oxandrolone	IWV, Air-cell wheelchair cushion	None.
11	69	Traumatic SCI, Tetraplegia	Sacral	No	Yes	Yes	General diet, Protein shakes	IWV, Air Fluidized Bed, Mattress overlay, Air-cell wheelchair cushion	None, released from service.
12	40	Developmentally handicapped	Sacral	No	N/A	Yes	Tube feeds, then PEG established	IWV, Mattress overlay	None

1 3	65	Traumatic SCI, Paraplegia	L Ischial	No	N/A	Yes	HPHC	IWV, Air Fluidized Bed, Mattress overlay	Recurrence at 1 month – Chronic seroma. Required reoperation.
1 4	32	Traumatic SCI, Paraplegia	B Ischial, Sacral	No	N/A	No	HPHC, Protein shakes	IWV, Air Fluidized Bed, Mattress overlay	Multiple complicated recurrences.
1 5	34	Traumatic SCI, Paraplegia	Sacral	No	N/A	Yes	HPHC	IWV, Air Fluidized Bed, Air-cell wheelchair cushion	None, released from service.
1 6	50	RLE amputation, wheelchair bound	Sacral	No	N/A	No	HPHC	IWV, Air Fluidized Bed, Mattress overlay	Broke down in hospital, patient refused to comply with off-loading protocol.
1 7	46	Traumatic SCI, Tetraplegia	L Troch	Yes	Yes	No	General diet, Protein shakes	IWV, Air Fluidized Bed	None, released from service.
1 8	43	Traumatic SCI, Paraplegia	L Ischial	Yes	N/A	Yes	<b>Oxandrolone</b>	IWV, Air Fluidized Bed	Recurrence at 1 month – Chronic seroma. Required reoperation.
1 9	55	Traumatic SCI, Paraplegia, bilateral AKA	B Ischial, Sacral, Perine al	No	N/A	Yes	<b>Oxandrolone</b> , Protein shakes	IWV, Air Fluidized Bed	Recurrence at 5 months. Poor patient compliance.
2 0	51	Traumatic SCI, Paraplegia	B Ischial, Sacral, Perine al	No	N/A	Yes	<b>Oxandrolone</b> , HPHC, Protein shakes	IWV, Air Fluidized Bed	Recurrence at 3 months. Poor patient compliance.
2 1	44	Traumatic SCI, Paraplegia	R Ischial	No	N/A	No	HPHC, Protein shakes	IWV, Air Fluidized Bed	None, released from service.
2 2	38	Traumatic SCI, Paraplegia	L Ischial	No	N/A	No	General diet	IWV, Air Fluidized Bed, Air-cell wheelchair cushion	None, released from service.
2 3	23	Traumatic SCI, Paraplegia	R Troch	No	N/A	No	<b>Oxandrolone</b> , General diet, Protein shakes	IWV, Mattress overlay	None.

24	54	Traumatic SCI, Paraplegia	R Ischial, R Troch, Sacral	No	N/A	Yes	Oxandrolone	IWV, Air Fluidized Bed, Air-cell wheelchair cushion	None, released from service.
25	36	CP, Tetraplegia	R Ischial, Sacral	Yes	No	No	Protein shakes	IWV, Mattress overlay	None.
26	57	Traumatic SCI, Tetraplegia	L Ischial	Yes	Yes	No	Protein shakes	IWV, Air Fluidized Bed, Air-cell wheelchair cushion	None, released from service.
27	63	Traumatic SCI, Paraplegia	B Ischial, Sacrum	Yes	N/A	No	Oxandrolone	IWV, Air Fluidized Bed	None.
28	65	Traumatic SCI, Tetraplegic	Sacral	Yes	Yes	Yes	Oxandrolone	IWV, Air Fluidized Bed, Mattress overlay	None, released from service.
29	51	Spina bifida, congenital hydrocephalus	L Ischial Sacral	No	No	No	General diet, Protein shakes	IWV, Mattress overlay	None, released from service.
30	42	Traumatic SCI, Paraplegic	R Ischial, Sacral	No	N/A	Yes	Oxandrolone	IWV, Air Fluidized Mattress	Recurrence at 3 months.
31	31	Cauda equina syndrome, Paraplegia	Sacral	No	N/A	No	HPHC	IWV, Mattress overlay	Recurrence at 8 months.
32	72	Traumatic SCI, Paraplegic	B Ischial, R Troch	No	N/A	Yes	HPHC	IWV, Air Fluidized Bed, Mattress overlay	None.
33	46	Traumatic SCI, Paraplegic	Sacral	No	N/A	No	HPHC	IWV, Air Fluidized Bed	None.
34	58	Traumatic SCI, Tetraplegia	R Ischial	No	Yes	Yes	Oxandrolone, HPHC, Protein shakes	IWV, Air Fluidized Bed	None, released from service
35	59	Advanced MS, Tetraplegia	B Ischial, Sacral, R Troch, RLE	No	No	Yes	Megace	IWV, Air Fluidized Bed	None.
36	28	Traumatic SCI, Tetraplegia	B Ischial, L troch, Sacral	Yes	No	No	Oxandrolone	IWV, Air Fluidized Bed	None.
37	9	Traumatic SCI, Tetraplegic	Sacral	No	No	Yes	Oxandrolone	IWV, Air Fluidized Bed	None.

3 8	66	Traumatic SCI, Paraplegia	Sacral	No	N/A	<b>Yes</b>	HPHC, Protein Shakes	IWV, Air Fluidized Mattress	None.
3 9	58	Traumatic SCI, Tetraplegia	Sacral	No	No	<b>Yes</b>	HPHC	IWV, Air Fluidized Mattress	Recurrence at 4 years.

PS = Pressure Sore; LE = Lower Extremity; UE = Upper Extremity; SCI = Spinal Cord Injury; B = Bilateral; R = Right; L =

Left; Troch = Trochanter; CP = Cerebral Palsy; HPHC = High Protein, High Calorie; IWV = Incisional Wound Vac; N/A

= Not applicable, indicating the patient was not a candidate for the procedure.