

THE VEDS MOVEMENT



A Division of the Marfan Foundation

EMERGENCY ALERT CARD

Print out card for every member of household. Fill in patient name and contact information.
Cut along dotted line. Fold vertically and horizontally. Carry this card at all times.

FOLD



EMERGENCY ALERT CARD

DO NOT SEND THIS PERSON HOME

UNTIL ARTERIAL/AORTIC DISSECTION OR RUPTURE,
PERFORATED BOWEL, PNEUMOTHORAX or CAROTID
CAVERNOUS SINUS FISTULA IS RULED OUT

This person has **VEDS**, a genetic condition, which puts them at an extremely high risk for:

- arterial/aortic dissection/rupture
- bowel or uterine rupture
- pneumothorax
- carotid cavernous sinus fistula

A CTA or MRA are the most definitive tests to identify these complications. Choose one that is most readily available and expertly performed and interpreted. An X-ray does **NOT** rule out the possibility of dissection.

PROCEED WITH CAUTION AND AVOID INVASIVE PROCEDURES

Release contrast and fluids slowly. Skin bruises and tears very easily. Monitor blood pressure closely. Do not use strong adhesives.

Important information for medical professionals and contacts for consultants are available.



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VEDS911.com | Info-Line 470-563-VEDS (8337)

PATIENT NAME: _____

In an emergency situation, contact the following people:

Name and contact info for PCP, geneticist, or other specialist

Name and contact info for vascular surgeon or other specialist

DEFINITION & KEY RISKS

VEDS = COL3A1 mutations affecting type III collagen in vessels/bowel walls

- Arterial & bowel rupture
- Uterine rupture (late gestation)
- Spontaneous pneumothorax
- Carotid-cavernous sinus fistula

→ **LIFE THREATENING** conditions

HIGHEST MORTALITY RISK: Spontaneous arterial rupture
50% of aortic dissections die within 48 hours

Bowel rupture → rapid sepsis

DO NOT dismiss until definitively ruled out

⚠️ AVOID UNLESS ABSOLUTELY REQUIRED

- Arterial blood gas measurement
- Arteriography
- Colonoscopy

(due to tissue fragility)

Central lines: IJ/femoral only w/ US guidance

Endoscopy: If necessary, low pressure, pediatric endoscope

SIGNS OF DISSECTION/RUPTURE

Pain • CV instability • Pulselessness • Paresthesia • Paralysis • Syncope • Headache • Stroke symptoms •

Patient stating, "Something terribly wrong"

EMERGENCY MANAGEMENT

Risks: rapid progression & poor outcome

If aortic/arterial dissection or bowel perforation:

1. Specialized aggressive care tailored to VEDS may be needed
2. Acute stabilization
3. **IMMEDIATE transfer to tertiary center if possible**
4. Consult experts if diagnosis known

Consensus: Professional Advisory Board, The Marfan Foundation
Evidence-based guidelines: ACC/AHA • 8 professional organizations

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