

KEY PROCEDURES

FINGERTIP INJURY AND MANAGEMENT

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Abstract

ingertip injuries are common and can be difficult to manage because of unique anatomical considerations. Optimal treatment minimizes residual pain while preserving the function, length, and sensation of the affected digit. Several types of fingertip injury, including sharp or crush injuries, partial or complete amputations, and those involving the nail plate or nail bed, can occur. Depending on the type of injury, location within the fingertip, degree of soft-tissue loss, and involvement of perionychium, the most effective management may be one of several options. Knowledge of local and regional anatomy is paramount in selecting and performing the procedure that provides the best outcome. To address the array of possible fingertip injuries, we demonstrate several treatment options including (1) local flap reconstruction, (2) regional flap reconstruction, (3) revision or completion amputation, (4) nail bed repair, (5) acellular dermal regeneration templating, and (6) replantation. Outcomes are generally favorable but can be affected by injury and patient characteristics. The most common complications include nail deformity, cold intolerance, and painful neuroma formation.

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