Mallet Finger
A mallet finger is a deformity of a finger caused by damage to the extensor tendon as it attaches to the bone at the tip of the finger. The extensor tendon allows the finger to straighten. The tendon can be injured by a forceful blow to the tip of the finger or a cut on the top of the finger. Occasionally, the tendon may pull a piece of bone away as it ruptures. The last knuckle of the finger or thumb is no longer able to straighten and the tip of the finger droops. The finger is usually painful, swollen, and bruised. Sometimes, blood can collect underneath the nail.

The majority of mallet finger injuries can be treated without surgery. Medical attention should be sought within a week after injury. A finger splint is applied to hold the fingertip in extension (straight). The splint must be worn constantly for 6-8 weeks. It is very important that the tip of the finger is not bent during this time period to allow the tendon to heal appropriately. Over the next month, the splint is worn only at night and the patient may use their fingers fully during the day. Although the finger usually regains an acceptable function and appearance with this treatment plan, many patients may not regain full fingertip extension.

Explanation of Procedure
Surgery is performed when there is a large displaced bone fragment or joint malalignment. In these cases, the fracture is repaired using pins, pins and wire, or even small screws. Surgery may also be performed if the fingertip still has a significant droop even after 8 weeks of splinting. Surgical treatment of the damaged tendon can include tightening the stretched tendon and temporarily pinning the joint, using tendon grafts, or even fusing the joint straight.

Preparing for Surgery
Once the patient decides to have surgery, the physician and his staff will schedule the procedure at the local hospital or surgery center. Blood tests are usually obtained to make sure the patient is safe for surgery. If the patient has multiple or severe medical conditions, he/she may see her primary care doctor for a physical exam prior to surgery. Patients are instructed to have nothing to eat after midnight the day before their surgery. All blood thinning medications, including anti-inflammatories such as ibuprofen and aspirin, should be stopped 7 days prior to surgery. In addition, certain medications for rheumatoid arthritis will need to be stopped as well. Your surgeon will go over your medication list and let you know which medications will need to be stopped.

What to Expect at Surgery
Expect to arrive at the hospital or surgery center at least 1-2 hours prior to your actual surgery time. This gives the staff time to meet you, get all your paperwork is in order, and make sure you are safe and ready for surgery. You will meet many different people on the day of surgery. A preoperative nurse will get you dressed and ready for surgery. The anesthesiologist will discuss the different options available to help you sleep comfortably and pain-free during the actual surgery. The circulating nurse and scrub tech assist the surgeon during the procedure. Finally, the postoperative nurse will help you recover from the anesthesia after the surgery. Depending on the type of anesthesia you receive, you may be in the postoperative care area from anywhere from a half hour to three hours after your procedure. A friend or relative will need to drive you home after you are released from the postoperative care unit.
Care After Surgery
The surgical dressing will remain in place until you see your surgeon back in the office, generally within 7-10 days after surgery. You will be instructed to keep the dressing clean and dry. Patients are able to shower by placing a plastic bag over the dressing. At your first postoperative visit, the dressing will be taken off, sutures removed, and a fingertip splint will be given. The finger is usually splinted straight for 6 weeks. You will then be given home exercises or a hand therapy prescription to regain motion in your finger.

Possible Complications and Instructions
Despite surgery, you might not regain full extension of your fingertip. Another possible complication is infection. Common signs of infection include increasing pain after surgery, increased redness around the incision, swelling, and drainage. Patients may have fever or chills as well. If you experience any of these symptoms, contact your surgeon immediately. If you are unable to see your doctor, go to the emergency room.

Questions
The CORE Institute is dedicated to your outcome. If any questions or concerns arise, please call The CORE Institute at 1.866.974.2673.