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## **Digital Amputation**

### **3-5 days:**

Splint/Dressing: The dressing is removed, and if adherent, can be soaked off with peroxide or saline. The incision is then re-covered with Vaseline gauze (unless skin macerated, then just dry gauze) and a light Coban wrap or a tip protector splint depending upon degree of swelling and patient preference. Patient may shower and get wound wet but not bathe.

Motion: Begin unrestricted ROM of digit every 2 hours, avoiding pressure on tip

### **10-14 days:**

Splint/Dressing: Sutures are removed, and assuming wound is healed, scar massage and desensitization begin 3-4 times per day, 10 minutes per session. Continue Coban wrap until swelling resolved. Can also apply silicon cap to tip prn when tip non-tender

Motion: Range of motion exercises are continued and can consider taping or flexion glove for extension contracture. Begin strengthening with putty.

### **4-6 weeks:**

Manual laborers can likely return to work, as tip sensitivity should be resolving

Please alert the physician should there be evidence of a focal neuroma, which may respond to TENS, or if the patient does not appear to be coping well with the injury, as these can often be difficult for patients psychologically.

Please call with questions or concerns at the phone number above.