[Current Date]     [Current Time]

                                                    OPERATIVE REPORT

OPERATION: LEFT   FINGER TENDON SHEATH INFECTION INCISION AND DRAINAGE

PREOP DIAGNOSIS: LEFT  FINGER TENDON SHEATH INFECTION

POSTOP DIAGNOSIS: SAME

COMPLICATIONS: NONE

ANESTHESIA: GENERAL

SURGEON: DOUGLAS A. WALDMAN, MD

ASSISTANT: NONE

ESTIMATED BLOOD LOSS: 

SPECIMEN SENT TO LAB: CULTURES X 2, PATH SPECIMEN

DRAINS: 

PROCEDURE IN DETAIL

THIS PATIENT IS A  WHO HAD   EMERGENT DRAINAGE WAS RECOMMENDED.

PATIENT SIGNED PERMIT UNDERSTANDING RISKS OF INFECTION, BLEEDING, LIMB LOSS, DEATH, AND FAILURE OF PROCEDURE TO ACHIEVE DESIRED OR STATED GOALS.

PATIENT WAS BROUGHT BACK TO OPERATING ROOM.  CAREFULLY POSITIONED ON OPERATING TABLE.  TOURNIQUET APPLIED TO UPPER LEFT ARM OVER ACE WRAP, AND PROTECTED WITH PLASTIC U DRAPE.

PREP WITH BETADINE SCRUB THEN CHLORAPREP FINGERTIPS TO TOURNIQUET LEVEL.  STERILE DRAPES APPLIED. EXSANGUINATION BY ELEVATION, TOURNIQUET INFLATED TO  mm Hg FOR MINUTES.

ULNAR LATERAL INCISION MADE ON LEFT FINGER.   INFECTION DRAINED, TISSUE DEBRIDED. COPIOUS IRRIGATION WITH SALINE SOLUTION THROUGHOUT PROCEDURE.  CULTURES AND PATH SPECIMEN OBTAINED. INSERTED DRAIN .

TOURNIQUET WAS DEFLATED.  BLEEDERS COAGULATED WITH CAUTERY.  SKIN TACKED WITH 2-0 NYLON X 2.  10 mL 1% PLAIN LIDOCAINE DIGITAL BLOCK, BOTH SIDES OF LEFT FINGER AT MCP JOINT FROM DORSAL.

GOOD VASCULAR SUPPLY HAD RETURNED TO LEFT HAND AFTER TOURNIQUET DEFLATION.  BULKY ULNAR GUTTER HAND DRESSING WITH WET AND DRY GAUZE,

TO PACU IN GOOD CONDITION.  TARGET HOME TOMORROW ON ORAL ANTIBIOTICS, OFFICE ONE WEEK.  PROGNOSIS GOOD

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