The Hand

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Initial Exam

Observation: Swelling, redness, obvious deformity
Sensory: Median, radial, ulnar nerve distributions
   Specific area distal to a lesion, injury
Motor: Flexor, extensor tendons, opposition, intrinsics.
Vascular: Allen’s Test, capillary refill

Common Injuries

Subungual Hematoma: Protection, pain medication. Can drain if fresh and very painful
Mallet Finger: Usually from forced flexion, blow to fingertip. Splint in extension & refer
Gamekeeper’s/skier’s thumb: sprain of ulnar collateral ligament of MCP of thumb
   Test for laxity of ligament, pinch test
Sprain: can be of any joint. Splint. Refer if severe

Infections

Paronychia: soaks, drainage. Antibiotic if much cellulitis
Felon: bacterial infection of distal pulp space. Needs urgent drainage
   Can be confused with Herpes infection.
Secondary syphilis: papulosquamous eruption on the palms and generalized rash
   Differential includes Rocky Mountain Spotted fever and Erythema Multiforme
Scabies: multiple dorsal burrows & excoriations. Can see mite parts with scrapings
   Treat with topical permethrins or lindane(not in children)

Arthritis

Rheumatoid: Symmetrical pain, swelling, redness. Joint involvement elsewhere
   Serologic confirmation
Osteoarthritis: Distal-Heberden’s Nodes
   Proximal-Bouchard’s nodes
Psoriatic: Most commonly, distal joints of fingers
   Associated nail changes and typical rash elsewhere
Gout: distal tophi with joint destruction. Usually a long history of recurrent joint inflammations
Miscellaneous

Ganglion: synovial cyst from joint or tendon sheath. Follow or refer for surgical removal.

Dupytren’s Contracture: progressive fibrosis of palmar fascia with trapping of flexor tendons.
  Surgical release if severe.

Trigger Finger: Constriction/fibrosis around A-1 flexor pulley.
  Refer for steroid injection or surgery.

DeQuervain’s Tenosynovitis: Inflammation of extensor pollicis longus/brevis tendons.
  NSAIDs, splinting, PT. Steroid injection if not responding.

Dermatomyositis: Erythematous rash over dorsal MCP & DIP joints.
  Gottron’s sign-flat topped papules over joints.

Nails:
  Ridging: transverse-trauma to nailbed- manicuring, biting.
  Longitudinal-aging, hyperthyroidism.

  Clubbing: Loss of angle between nail & base of finger; softening of nailbase.
  Familial, cyanotic congenital heart disease.
  Lung cancer; occasionally COPD, cirrhosis.

Reference