



Note 1 - Clinical history and examination

History – hand dominance, patient’s occupation, interference with normal daily activities / work / recreational activities, location / duration / history of symptoms / trauma, symptoms worse on waking, previous treatments tried including splint, injection therapy, recurrence, co-morbidities including diabetes / rheumatoid arthritis.
Examination – Pain / tenderness at site of triggering (at base of finger or for the thumb in palm), movement causes clicking or locking or crepitus, palpable nodule / thickening, extension facilitated by other hand, locked digit (fixed flexion deformity or stiff digits usually at the IPJ or finger PIPJ)

Note 2 - PIFU

Trusts must be able to provide PIFU patients with quick access to respond to urgent concerns in the 2 weeks following surgery.



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