

MEDRC-2193-01 ST. ANTHONY MEMORIAL HOSPITAL-LIVE  
11/09/92 18:24 (QAIRLR)

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DEATON, DANNY MONROE M 41  
ACCT/MR# 5816762/0278597 DOB: 11/29/50  
SERV: 3RD 380U 030302 ADM: 11/08/92  
MD: NAAM, NASH MD ✓  
DX: GUN SHOT WOUND RT HAND  
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OPERATIVE REPORT

REQ#: 4-314-006

ORDER: SURGERY 18.01

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DATE OF PROCEDURE: 11/08/92

PREOPERATIVE DIAGNOSIS:

1. CLOSE RANGE HIGH-POWERED RIFLE GUNSHOT WOUND OF THE RIGHT HAND.
2. OPEN EXTENSIVELY COMMINUTED FRACTURE OF THE RIGHT THUMB METACARPAL WITH SIGNIFICANT BONE LOSS.

POSTOPERATIVE DIAGNOSIS:

1. CLOSE RANGE HIGH-POWERED RIFLE GUNSHOT WOUND OF THE RIGHT HAND.
2. OPEN EXTENSIVELY COMMINUTED FRACTURE OF THE WHOLE LENGTH OF THE RIGHT THUMB METACARPAL WITH SIGNIFICANT BONE LOSS.
3. EXTENSIVE LACERATIONS OF THE THENAR MUSCLES.
4. SHREDDED LACERATIONS OF THE EXTENSOR TENDON OF THE RIGHT THUMB WITH TISSUE LOSS.

OPERATION:

1. EXTENSIVE DEBRIDEMENT AND THOROUGH IRRIGATION OF SEVERE CLOSE RANGE HIGH-POWERED RIFLE GUNSHOT WOUND OF THE RIGHT HAND.
2. STABILIZATION OF THE OPEN SEVERELY COMMINUTED INTRA-ARTICULAR FRACTURE OF THE RIGHT THUMB METACARPAL WITH PINNING OF THE RIGHT FIRST AND SECOND METACARPALS.
3. REPAIR OF THE SEVERE LACERATIONS OF THE EXTENSOR TENDON OF THE RIGHT THUMB.
4. DEBRIDEMENT AND REPAIR OF THE ABDUCTOR POLLICIS BREVIS, FLEXOR POLLICIS BREVIS, AND OPPONENS POLLICIS.
5. COMPLEX REPAIR OF JAGGED EXIT WOUND OF THE THENAR EMINENCE AND THE VOLAR ASPECT OF THE WRIST (8 CM.).

SURGEON: N. NAAM, M.D.

ANESTHESIA: GENERAL ENDOTRACHEAL.

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DEAYON-DANNY MONROE M 41

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PRELIMINARY NOTES: MR. DEATON IS A VERY PLEASANT 41 YEAR OLD RIGHT HAND DOMINANT MALE PATIENT WHO SUSTAINED AN ACCIDENTAL CLOSE RANGE HIGH-POWERED RIFLE GUNSHOT WOUND TO THE RIGHT HAND WHILE HE WAS CLEANING HIS LOADED RIFLE. THE PATIENT SUSTAINED AN EXTENSIVE INJURY OF THE RIGHT HAND. THERE WAS AN ENTRY WOUND ON THE DORSAL ASPECT OF THE FIRST WEB SPACE MEASURING 3 X 2 CM. WITH TATTOOING OF THE EDGES OF THE SKIN WITH BLACK POWDER. THAT WAS THE ENTRY WOUND. THE EXIT WOUND WAS MORE EXTENSIVE, AND IT WAS ON THE VOLAR ASPECT OF THE WRIST AND THE HAND INVOLVING THE WHOLE RIGHT THENAR EMINENCE AND EXTENDING ULNARLY TOWARDS THE ULNAR SIDE OF THE WRIST ACROSS THE VOLAR ASPECT OF THE WRIST. THE EXIT WOUND MEASURED 8 X 3 CM. THE X-RAYS REVEALED EXTENSIVE COMMINUTION OF THE WHOLE LENGTH OF THE THUMB METACARPAL EXTENDING FROM THE ARTICULAR SURFACE OF THE TRAPEZIOMETACARPAL JOINT AND EXTENDING TO THE ARTICULAR SURFACE OF THE METACARPOPHALANGEAL JOINT. THERE WAS A SIGNIFICANT DEGREE OF BONE LOSS. THE THUMB WAS FOUND TO BE VERY UNSTABLE. THERE WERE FRAGMENTS OF THE BULLET INSIDE THE METACARPAL SEEN ON THE X-RAY.

PROCEDURE: THE PATIENT WAS BROUGHT TO THE OPERATING ROOM WHERE HE WAS PLACED ON THE OPERATING TABLE IN A SUPINE POSITION WITH THE RIGHT HAND PLACED OVER A SIDE TABLE. AFTER SATISFACTORY ADMINISTRATION OF GENERAL ENDOTRACHEAL ANESTHESIA, THE RIGHT UPPER EXTREMITY WAS PREPPED AND DRAPED IN THE USUAL ASEPTIC MANNER. THE WHOLE OPERATION WAS PERFORMED UNDER MAGNIFICATION OF 3.5 USING SURGICAL LOOPS. THE RIGHT UPPER EXTREMITY WAS EXSANGUINATED. THEN THE TOURNIQUET WAS INFLATED TO 275 MM. MERCURY.

USING SIMPULSE IRRIGATION SYSTEM, THE EXIT AND ENTRY WOUNDS WERE THOROUGHLY IRRIGATED WITH COPIOUS AMOUNTS OF NORMAL SALINE. ALL THE JAGGED TATTOOED EDGES OF THE ENTRY WOUND WERE SURGICALLY DEBRIDED. THE JAGGED EDGES OF THE EXIT WOUND WERE ALSO DEBRIDED. MULTIPLE SMALL FRAGMENTS OF METAL WERE IDENTIFIED IN THE DIFFERENT LAYERS OF THE WOUND. THOSE FRAGMENTS WERE REMOVED. A LARGE PIECE OF THE BULLET WAS IDENTIFIED IN BETWEEN THE FRAGMENTS OF THE FRACTURED FIRST METACARPAL, AND THAT FRAGMENT WAS REMOVED. THERE WAS EXTENSIVE CONTAMINATION OF THE WHOLE WOUND. ALL THE DEVITALIZED TISSUES WERE SURGICALLY DEBRIDED. THE QUESTIONABLY DEVITALIZED TISSUES WERE LEFT ALONE. THE DEBRIDEMENT WAS VERY EXTENSIVE AND INVOLVED THE THROUGH-AND-THROUGH INJURIES AT THE ENTRY AND EXIT WOUNDS.

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AFTER EXTENSIVE IRRIGATION AND DEBRIDEMENT, THE ATTENTION WAS DIRECTED TOWARDS EXPLORATION OF THE WOUND UNDER MAGNIFICATION. THERE WERE EXTENSIVE LACERATIONS OF THE EXTENSOR MECHANISM OF THE THUMB AT THE LEVEL OF THE METACARPAL. THE LACERATION OF THE EXTENSOR TENDON WAS FOUND TO BE SIGNIFICANTLY SHREDDED. THE METACARPAL ITSELF WAS FOUND TO BE EXTREMELY COMMINUTED. MOST OF THE FRAGMENTS WERE EXTREMELY SMALL AND ALMOST LIKE POWDER. THERE WAS A SIGNIFICANT DEGREE OF BONE LOSS THAT PRECLUDED ANY ATTEMPT OF OPEN REDUCTION AND INTERNAL FIXATION. ON THE VOLAR ASPECT THERE WERE EXTENSIVE LACERATIONS OF THE THREE THENAR MUSCLES, THE ABDUCTOR POLICIS BREVIS, THE FLEXOR POLICIS BREVIS, AND THE OPPONENS POLICIS. THE DEVITALIZED PART OF THE MUSCLES WERE SURGICALLY DEBRIDED. I COULD NOT IDENTIFY ANY INJURY OF THE MEDIAN NERVE NOR ANY INJURY OF THE FLEXOR TENDONS. THE DIGITAL NERVES WERE NOT EXPOSED IN THE WOUND, AND NO ATTEMPT WAS MADE TO EXPLORE THEM AT THE PRESENT TIME.

AFTER THOROUGH EXPLORATION OF THE WOUND, THE ATTENTION WAS DIRECTED TOWARDS REPAIRING THE THENAR MUSCLES AND THE EXTENSOR TENDON. THE THREE THENAR MUSCLES WERE REPAIRED INDIVIDUALLY WITH INTERRUPTED SUTURES OF 4-0 PDS. THE REPAIR WAS STARTED WITH THE OPPONENS POLICIS, THEN THE FLEXOR POLICIS BREVIS, AND FINALLY THE ABDUCTOR POLICIS BREVIS. THE REPAIR WAS FOUND TO BE VERY SATISFACTORY.

THEN THE ATTENTION WAS DIRECTED TOWARDS REPAIRING THE EXTENSOR TENDON OF THE THUMB. THE EXTENSOR MECHANISM WAS REPAIRED WITH INTERRUPTED SUTURES OF 4-0 PROLENE IN A HORIZONTAL MATTRESS FASHION WITH INVERSION OF THE KNOTS. THE REPAIR WAS FOUND TO BE VERY SATISFACTORY.

THE ENTRY WOUND WAS LEFT OPEN AFTER SURGICALLY DEBRIDING THE EDGES. THE EXIT WOUND WAS SURGICALLY DEBRIDED, THOROUGHLY IRRIGATED AND THEN IT WAS CLOSED WITH INTERRUPTED SUTURES OF 5-0 PROLENE.

THE ATTENTION THEN WAS DIRECTED TOWARDS STABILIZATION OF THE FRACTURE. THE DECISION WAS MADE TO PIN THE DISTAL END OF THE THUMB METACARPAL TO THE SECOND METACARPAL. UNDER C-ARM CONTROL, THE DISTAL END OF THE FIRST METACARPAL WAS PINNED TO THE SECOND METACARPAL WITH A 0.045 - INCH KIRSCHNER WIRE IN ORDER TO MAINTAIN THE LENGTH OF THE METACARPAL. THE END OF THE K-WIRE WAS CLIPPED OFF AT THE LEVEL OF THE SKIN.

STERILE BULKY HAND DRESSING WAS APPLIED. THEN A THUMB SPICA SPLINT WAS

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OPERATIVE REPORT

THE PATIENT TOLERATED THE PROCEDURE VERY WELL, AND HE WAS THEN TRANSFERRED TO THE RECOVERY ROOM IN SATISFACTORY CONDITION.

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