

Mallet finger advice

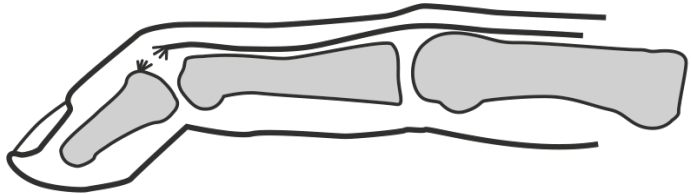
Information for patients



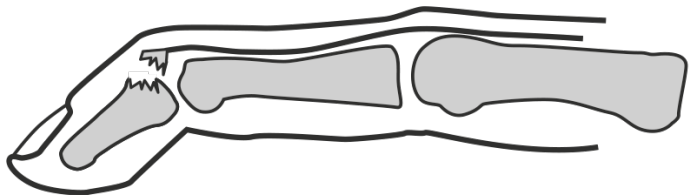
This information leaflet is for people who have had a mallet finger injury. It describes the injury, symptoms and treatment.

What is a mallet finger?

A mallet finger is where the end joint of the finger bends towards the palm and cannot be straightened. This is usually caused by an injury to the end of the finger which has torn the tendon that straightens the finger.



Sometimes a flake of bone may have been pulled off from where the tendon should be attached to the end bone. An X-ray will show whether this has happened.



In either case, without the use of this tendon the end of your finger will remain bent.

What are the symptoms?

- pain
- swelling
- inability to straighten the tip of your finger.

How is it treated?

Your finger will be placed in a plastic splint to keep it straight. The end joint will be slightly over extended (bent backwards). The splint must be worn both day and night for 6 to 8 weeks. This allows the two ends of the torn tendon or bone to stay together and heal.

The splint will be taped on, allowing you to bend the middle joint of your finger.



The splint should only be removed for cleaning (see below). Although you can still use your finger, you should keep your hand elevated (raised) in a sling for most of the time, until the doctor sees you in the outpatient clinic. This will help to reduce any swelling and pain.

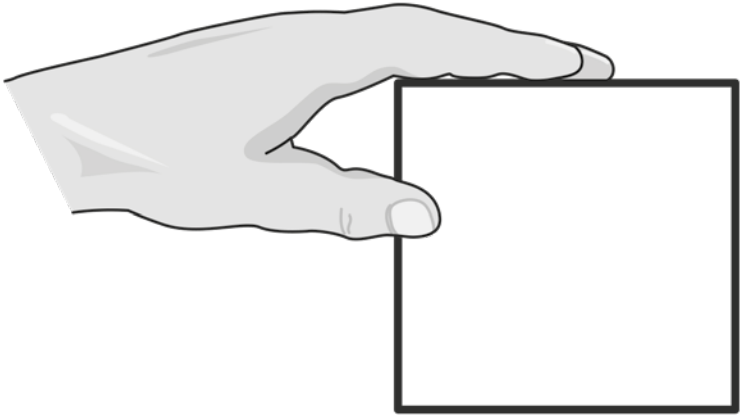
Pain relief

You can take painkillers such as paracetamol and ibuprofen. These can be purchased over the counter at many shops and chemists. We recommend that you take them regularly and at the same time, as they work well together to help relieve pain. Always read the instructions included with the medicines carefully and never exceed the recommended dosage.

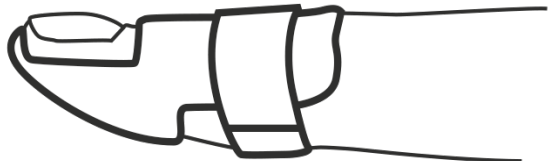
How to keep your finger and splint clean

Your splinted finger must be kept clean and dry at all times. If the skin becomes wet inside the splint it will become very sore. It is important to wash both your finger and the splint at least once a day.

- Keeping your finger flat on the table cut the strapping off the splint and slide the splint off your finger.



- Wash and dry your finger and the splint thoroughly using soap and water. Keep the end joint straight at all times by keeping your finger flat on the table. You may find it easier if someone helps you to do this each day, as any movement of the tip of your finger will delay healing of the bone or tendon and may even cause permanent damage.
- Slide the splint back over your fingertip, still keeping your finger straight.
- Replace the strapping, which should cover the middle of the splint and but not the middle joint of your finger, allowing it to bend freely.



Exercise

You should avoid heavy gripping or lifting activities until you reach the end of your splinting period and have been advised by your Doctor or Hand Therapist.

With the splint in the correct position you should still be able to bend your finger at the middle joint. To prevent this joint from becoming stiff you should do this 10 times every day.

Problems you may encounter

- As the swelling in your finger goes down the splint can become loose.
- The swelling may increase making the splint too small.
- You may have problems getting the splint on and off.
- The splint may rub and become uncomfortable.
- Your skin may become damp and soft and eventually break down or become sore.

If any of these problems occur please mention it at your Hand Clinic follow-up appointment.

Follow-up appointment

You will have been referred to the plastics team who deal with hand injuries (Oxford, John Radcliffe) or the trauma team (Banbury, Horton General Hospital).

If you have been referred to the plastics team, they will contact you with details of follow up. If you have been referred to the trauma team, you will be given details of your appointment in the Emergency Department.

If you have any questions or concerns, please contact the relevant department as below:

HAPI Clinic

(Hand and Plastics Injury)

Specialist Surgery Inpatient Ward (SSIP) Level 0, West Wing
John Radcliffe Hospital

Tel: **01865 234 723** or
01865 234 760

(8am to 5pm)

Fracture Clinic

Outpatients Department
Horton General Hospital

Tel: **01295 229 364** (Clinic) (9am to 1pm)

Tel: **01295 220 367** (Outpatient's reception)

Feedback

If you would like to tell us anything about your experience in the emergency department, please speak to the nurse in charge. Alternatively you can contact the patient advice and Liason service. (PALS)

Email: **PALS@ouh.nhs.uk**

Call: **01865 221 473**
01295 229 259

You can also email: **feedback@ouh.nhs.uk**

For more information, please visit: **www.ouh.nhs.uk**

Further information

If you would like an interpreter, please speak to the department where you are being seen.

Please also tell them if you would like this information in another format, such as:

- Easy Read
- large print
- braille
- audio
- electronic
- another language.

We have tried to make the information in this leaflet meet your needs. If it does not meet your individual needs or situation, please speak to your healthcare team. They are happy to help.

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Oxford University Hospitals NHS Foundation Trust
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