SERVICE-AT-A-GLANCE

(MGH) OPD – Hand clinic

Location – Are you located on one floor or in several locations in the hospital?
- Main OPD located at C2-144
- Occasional coverage (2 afternoons/week) at the plastic surgery clinic at L9-200

Population – Describe in point form the characteristics of the patient population.
- Post-operative and traumatic hand injuries in an adult population are the priority (hand or wrist fractures, tendon injuries, nerve injuries, dislocations, burns and frost-bite injuries, cellulitis, carpal tunnel post-release, trigger-finger post-release, Dupuytren's release, Kienbock’s disease, etc.)
- Chronic injuries are also treated such as osteoarthritis, tendonitis, soft tissue injuries prior to surgical intervention, etc.

Age range
- Adult population (18 years+)

Impact of illness/injury
- Functional limitations in all spheres of occupation
- Compromised/fear of return to work
- Accepting altered appearance of affected structures
- Changing hand dominance

Medications: be aware of their indications as well as side effects affecting functions and precautions
- Pain medication
- Anticoagulants

Role – Describe the role of your service in point form.
- Assessment of the impact of injury on daily activities
- Positioning
- Treatment according to injury or post-operative protocols (edema control, ROM, wound care, scar management, sensory re-education, desensitization, strengthening)
- Activity modification
- Reorientation towards other community resources as needed (e.g. CLSC, other rehab centers, work station or work tasks assessments)

Team and Key Contacts– Indicate if you work in a multidisciplinary team; who are the key players, staff doctors, consulting CNS’s and other specialists.
- PT team at MGH hand center: #42900
- Plastic surgery department: #48025

Rounds – List the day(s), hours and location(s) of the clinical rounds for your service.
- No rounds

Medical Tests – Describe in point form the principle/most frequent risk factors that you assess specifically related to your patient population.
• Provocative testing if symptoms are reported by patients (e.g. Phalen’s & reverse Phalen’s for carpal tunnel syndrome, Tinel’s test for nerve injuries, etc.)
• If in doubt, patient is referred back to the medical team

Assessments - Describe in point form the principle/most frequent forms that you complete specifically related to your patient population in addition to the psychosocial assessment.
  • Initial OT assessment report
  • Semmes-Weinstein assessment
  • ADL checklist (in-house assessment)
  • DASH questionnaire

Resources - Describe in point form the principle/most frequent hospital and community resources that you allocate specifically related to your patient population.
  • CSST
  • CLSC
  • Other rehab centers, hospitals and private clinics

“Insider” Info – List any tips, cautions, fast-tracks, templates or lists that would help facilitate a quick-start for someone new to this service.
  • Upper extremity anatomy knowledge (Netter’s cue cards are very useful)
  • Quick guide to goniometry