

2022 NEHS Annual Meeting Abstract Submission

COMPLETE

NEHS Vice President, Daniel Mastella, M.D., is currently accepting abstract submissions for presentation at our Annual Meeting on December 2, 2022.

This meeting will be held at the Sturbridge Host Hotel in Sturbridge, MA.

Therapists, NPs, and PAs are also encouraged to submit.

THE DEADLINE FOR SUBMISSION IS OCTOBER 15, 2022

RESIDENTS AND FELLOWS ONLY. Please indicate if you want your paper to be considered for the prestigious H.Kirk Watson, M.D. Founder's Award. The abstracts for award consideration will be presented in the morning and the award will be presented in the afternoon.

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* ABSTRACT TITLE

Hand And Wrist Amputation: A Demographic Analysis Using The National Inpatient Sample

* Contact Person Name

Stephen Stearns

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* Name of who will present abstract at NEHS meeting on December 2, 2022 Please note that the same person cannot present more than one abstract at the meeting.

Stephen Stearns

* Please indicate if the presenter is:

Not currently a resident or fellow

* List full names of abstract authors

Stephen A Stearns, BA; Allan A Weidman, BS; Toni F Engmann; Lauren Valentine, BS; Angelica Hernandez Alvarez, MD; Jose Foppiani, MUDr; Samuel J Lin, MD, MBA, FACS; Arriyan S Dowlatshahi, MD

*** ABSTRACT - should include background information and a description of methods, programs, or practices.**

Background:

Traumatic hand and wrist amputations are rare but debilitating injuries. Surgical replantation of the hand provides a unique alternative to revision surgery but requires appropriate access to necessary medical resources. This study aims to understand how sociodemographic barriers impact the replantation rate of traumatic hand amputation on a national level.

Methods:

ICD-10 codes for replantation and revision amputation surgeries were used to gather data from the National Inpatient Sample from 2016-2019. Summary statistics were calculated on demographic, hospital, and outcome variables with sub-analysis performed for effect on replantation and revision rates.

Results:

72 patients were identified. The average patient was 37 years old with a strong male predominance (90%). Racial distribution of the cohort roughly mirrored the demographic proportions of race in the US population. 17 (24%) patients underwent replantation. This rate was similar between sexes ($p = 0.348$), races ($p = 0.715$), and income brackets (0.620). Hand replantation was primarily performed at large bed size (87%), private not-for-profit (73%), and urban teaching hospitals (100%). The most common insurance status for these patients was private, followed by Medicaid, Medicare, then self-pay. 47 patients underwent surgical revision (65%) with no association between demographic characteristics. Patients remained hospitalized for 11 days on average, regardless of the surgery received. Patients were most frequently discharged home (65%) followed by skilled nursing facilities (18%).

Conclusion:

This study investigates the current state of hand amputation management. With this information, surgeons may be more equipped to mitigate the impact of sociodemographic characteristics on appropriate treatment.

Please attach files with diagrams and/or photos to support your abstract (10 MB limit)

*** Please attach the abstract presenter's CV**

cv_nehs.pdf