Overview
This outpatient procedure is used to resolve the pain of a severely arthritic joint of the finger by permanently stopping finger movement. This is most commonly used for the joint nearest the fingertip, called the DIP joint, although any joint in the finger can be fused.

Preparation
The patient is positioned to allow the physician full access to the hand, and the finger is cleaned and sterilized. Anesthesia is administered and a tourniquet is applied.

Preparing the Joint
The surgeon makes an incision along the top of the finger to access the joint. The cartilage is removed completely from both sides of the joint and the ends of the bone are prepared so they fit closely together.

Securing the Fusion
The ends of the bones are aligned and secured together using pins, a plate, or screws. Usually over a period of six to eight weeks the ends of the bones will heal together into a solid fusion.

End of Procedure and Aftercare
The incision is closed with sutures and a local anesthetic is usually administered for post-procedure pain relief. After the bandage is in place, the finger is placed in a splint to protect the joint. The splint is usually worn to protect the joint until fusion has occurred. Elevation of the hand is encouraged to decrease swelling and pain.