



Wide-Awake Hand Surgery in the Office: Trends, Reimbursement and Perioperative Events

Office-based hand surgery is becoming more popular. Office-based surgery is associated with reduced financial burden on the healthcare system and similar or lower rates of adverse events and opioid prescriptions.

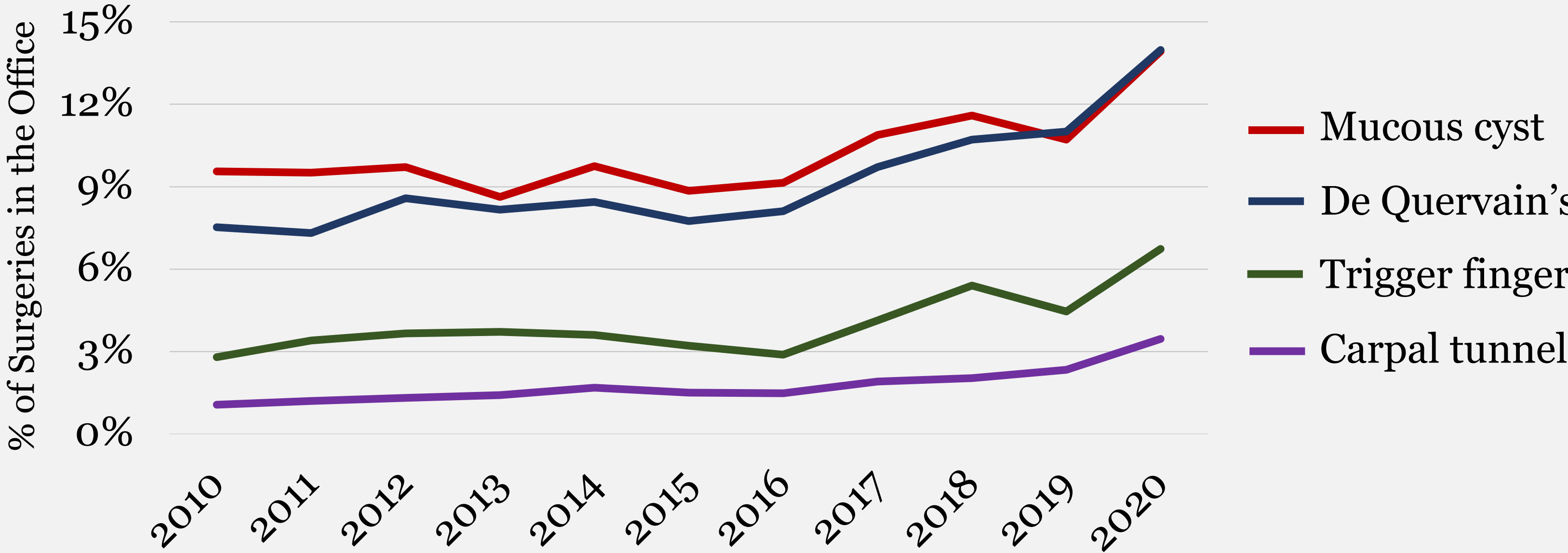
Methods

- Data: national administrative data from PearlDiver (2010-2020)
- Inclusion criteria: wide-awake trigger finger release, carpal tunnel release, de Quervain’s release and mucous cyst excision
- Exclusion criteria: age <18 years or <30 days of follow-up
- Cohorts: stratified by surgical setting (operating room or office) and matched 4:1 based on age, sex and Elixhauser comorbidity index score
- Endpoints: total and physician reimbursement, 30-day emergency department visits, surgical site infections and opioid prescriptions
- Statistics: t-tests for continuous variables, chi-squared tests for categorical variables

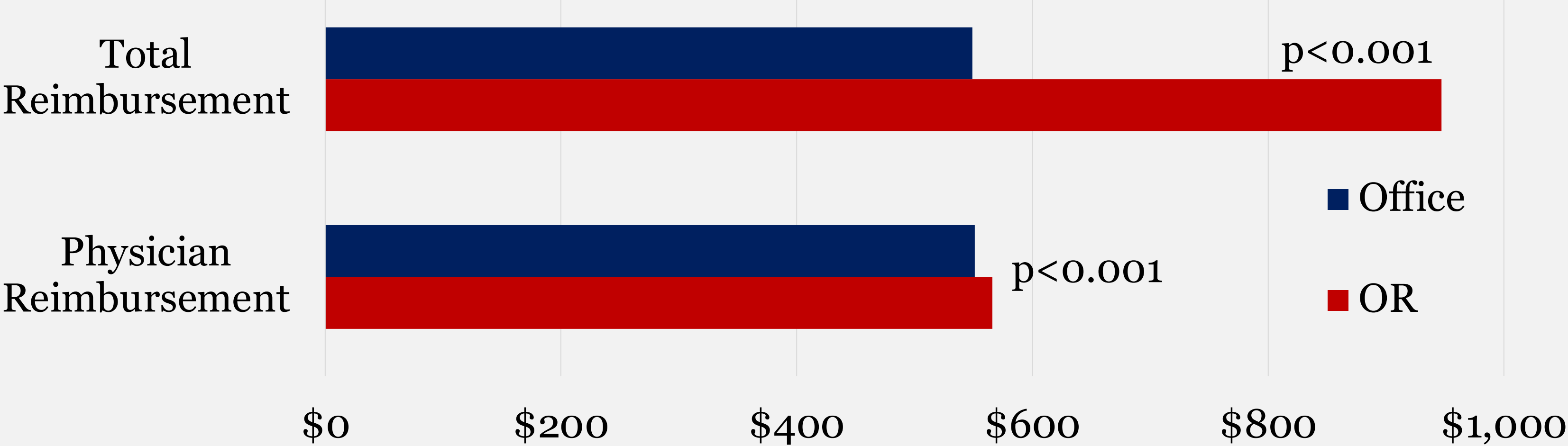
Final Cohorts

Characteristic	OR	Office	p-value
N	185,261	46,380	
Mean age (SD)	61 (11)	61 (11)	0.875
Female	119,836 (65%)	29,990 (65%)	1.000
Mean ECI score (SD)	3(3)	3(3)	1.000

Increasing Office-Based Surgery



Financial Burden



Perioperative Events

Event	OR	Office	p-value
Filled opioid prescription	94,522 (51%)	15,733 (34%)	<0.001
Emergency department visit	5,389 (2.9%)	1,002 (2.2%)	<0.001
Surgical site infection	546 (0.3%)	121 (0.3%)	0.903

Conclusions

- Office-based hand surgery is becoming more common, but only a small proportion of all cases take place in the office.
- Compared to surgeries in the operating room, those in the office have reduced financial burden, fewer filled opioid prescriptions and fewer postoperative emergency department visits.
- Office-based surgeries are cost-effective and safe, and more hand procedures should be performed in the office when possible.