## Parent-Reported Outcomes Following Type B Ulnar Polydactyly Excision in the Clinic Versus the Operating Room:

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**Background:** Ulnar polydactyly is the presence of an extra finger on the post-axial aspect of the hand. It is one of the most common congenital abnormalities and causes aesthetic and functional impairments that can be treated with surgical excision in the office or the operating room (OR). Our goal was to compare outcomes between type B ulnar polydactyly surgery performed in OR vs. office.

**Methods:** We reviewed treatment outcomes and administered a satisfaction survey via telephone or email link via REDCaps to parents of children with type B ulnar polydactyly treated at Riley Children's Hospital between 2020 and 2024. We assessed satisfaction with treatment decisions, outcomes, and motivational factors. Outcomes were assessed via visual analog scale from 1 to 10; 1 equating to minimum satisfaction, 10 equating to maximum satisfaction.

**Results:** In total, 34 of the 165 (20%) parents agreed to participate in the study. Of those 34, 17 parents elected for excision in the OR and 17 chose the office. There were no significant differences in race, education, or marital status between groups. In total, 15 families had a history of polydactyly and chose the operating room 64.3% of the time compared to 38.9% of the time from the families without a history of polydactyly. There was no significant difference in average comfort, satisfaction of outcome, function, and appearance VAS scores when stratified by family history of ulnar polydactyly. There were no significant differences in satisfaction between excision in the office or OR.

**Conclusions:** Office-based excision faces challenging logistics—sufficient lighting, staffing, and cooperation from parents and children. Parents who choose surgical excision in the office are satisfied with the treatment outcomes, would not change any of their treatment decisions, and would recommend their treatment process to others. While challenges exist, excision in the office may result in lower healthcare costs while providing similar outcomes.