Band Saw Safety Fatality File



A 35-year-old right hand dominant male butcher injured his dominant hand with a **meat band saw** while butchering a piece of raw pork at a supermarket. He presented to the emergency department within 30 min of the injury along with the amputated portion of his index finger, which contained the radial border of both the index metacarpal and proximal phalanx, connected by an intact radial collateral ligament of the metacarpophalangeal (MCP) joint. Examination of his right hand demonstrated a clean-cut wound on the radial side of the index finger extending from the mid-portion of the first web space to a point just distal to the MCP joint, with minimal active hemorrhage.

Tetanus toxoid booster and intravenous cefazolin were administered in the emergency department, and he was taken urgently to the operating room after written informed consent was obtained. Surgical fixation of the salvaged bony fragments and radial collateral ligament allowed reconstruction of the metacarpophalangeal joint and primary skin closure yielded a cosmetically acceptable result. After a course of cefalexin and post-operative hand therapy, the patient’s MCP joint had full range of active motion from 0 to 90 degrees of flexion and was stable to varus and valgus stresses throughout the flexion arc. No cultures were taken during debridement and there was no clinical evidence of infection during post-operative follow-up. Based on his functional improvement and adequate bony healing seen on a follow-up radiograph, he returned to his full duties as a butcher 16 weeks following the injury.