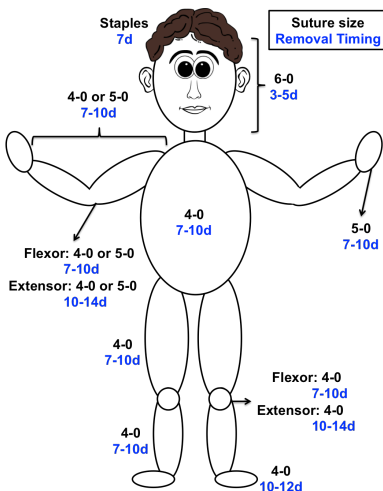


Laceration Repair and Sutures

Lee H, Abubshait L



Suture Type	Time of Effective Tensile Strength	Time to Absorption	Reactivity
Prolene	Indefinite	Non-absorbable	Low
Nylon	Gradual loss	Non-absorbable	Low
Silk	Gradual loss	Non-absorbable	High
Fast Absorbing Gut	7 days	21-42 days	High
Vicryl Rapide	5-14 days	42 days	High
Monocryl	7-14 days	91-119 days	High
Vicryl	14-28 days	56-70 days	High
Chronic Gut	21-28 days	90 days	High

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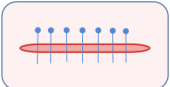

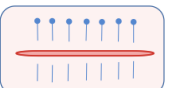
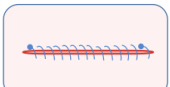


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Special Consideration

Location	Concern	Treatment
Eyelid margin	Requires careful approximation	Ophthalmology consult for repair
Medial canthus of eye	Lacrimal duct location	Ophthalmology consult for repair
Vermillion border of lip	Requires careful approximation	Consider consulting Oral Maxillofacial Surgery or Plastics
Mammalian bites	Risk for infection, especially of the hands: Human > Cat > Dog	<ul style="list-style-type: none"> • Antibiotics: Amoxicillin-clavulanate (Cochrane: Antibiotics not warranted for uncomplicated dog bites to non-hand areas of the body [1].) • Do not close wounds, especially if puncture-like.

Suture Technique

Technique	Indication	Diagram
Simple Interrupted	Go-to method of repair	
Horizontal Mattress	To repair high tension lacerations	
Vertical Mattress	To repair deep, gaping lacerations without using separate deep sutures	
Running	To quickly repair non-tensile lacerations	

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