ASCRS Clinical Practice Guidelines: Management of Pilonidal Disease

Hair removal may be used if no abscess present (1C)

Phenol application may result in rapid and durable healing (1B)

Value of prophylactic antibiotics is not clear (2B)

Acute abscess should be drained with I&D (1B)

Chronic disease: Excision with closed, open, or marsupialization all ok (1B)

Flaps may be performed for complex or recurrent disease (1B)