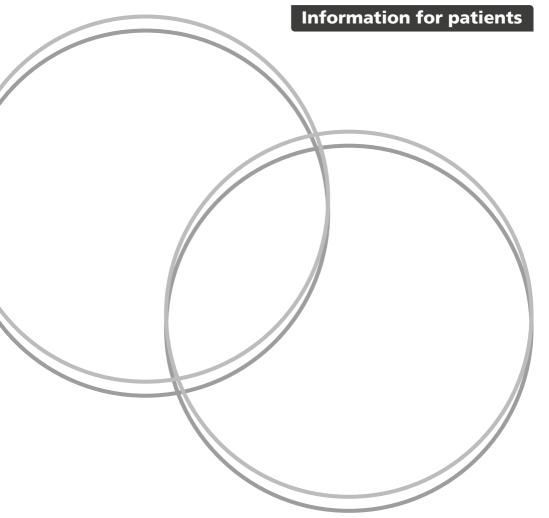


Wound care advice following your operation



Department of Dermatology

This leaflet has been written to answer questions you may have after your skin surgery.

The local anaesthetic will usually wear off in about 1 to 2 hours. During this time, do not do anything which could damage your wound. Avoid heavy lifting, stretching and doing any strenuous activity.

It is important to rest and eat a good balanced diet. This will aid your general healing and wellbeing and will help your wound to heal.

If you are in pain, we recommend that you take paracetamol, as instructed by the doctor or nurse.

Swelling and bruising can be a problem, especially if you have had a procedure around your eyes, lower legs or arms. This will be at its worst in the first 48 hours and will then slowly improve over time.

If you've had your wound closed with stitches, staples or 'scraped' shaved' off and cauterised, you will need to keep your dressing in place dry and clean for two days.

After two days you can shower or bathe as normal. Remove the wet dressing, dry the area gently but thoroughly and apply a plaster, if necessary (e.g. wound with some ooze, little bleeding; cover it up for social events).

Repeat this process until your stitches or staples are removed.

Frequently asked questions

'Can I keep the original dressing on for more than 48 hours?'

You should remove the top layer of the dressing after 48 hours so that the wound can be exposed to the air to dry and facilitate healing.

'When will I get my results?'

It can take up to six to eight weeks to process, examine and confirm skin sample results, although this can vary. We will write to you within this time. Occasionally, we will make other arrangements with you for receiving your results, such as giving them to you in clinic. If you haven't heard anything by 8 weeks, please contact the department for an update (see contact details on page 9).

Bleeding

If your wound starts to bleed or you notice blood on the dressing, do not panic. Slight oozing or spotting of blood on the dressing is normal. However, if the bleeding continues, apply firm, continuous pressure to the area for 20 minutes and elevate the affected body part above the chest level if possible. (This will stop most bleeding.)

'What should I do if I cannot stop the bleeding?'

Please contact the Dermatology department or your GP for advice. (See contact details on page 8.)

'What should I do if I take medication such as aspirin, warfarin, apixaban, rivaroxaban, endoxaban or clopidogrel, which are blood thinners?'

You are at a slightly higher risk of bleeding and bruising, but do not stop taking your medication unless advised to do so.

Swelling and bruising

You may have some swelling or bruising around the area that was operated on. This is very likely if you have had surgery around your eyes. This should improve over time.

'My swelling is not going down.'

Please contact the Dermatology department (page 8) or your GP for advice if you are concerned.

Infection

We take every precaution to prevent a wound infection before, during and after your operation. Despite this, some wounds will still become infected.

Symptoms of a wound infection are increasing swelling, redness or pain during the week after the operation. You may also experience an unusual smell from the wound, a pus-like discharge or feel generally unwell.

'Who do I contact if I think I have an infection?'

Contact the Dermatology department (see contact details on page 9) or your GP and have your wound assessed if you have one or more of the above symptoms. You may be prescribed an antibiotic if the wound is infected.

Smoking

Smoking affects your healing. It is best to stop smoking completely or to at least reduce your daily number of cigarettes for the duration of your healing.

Scarring

Every effort will be made to minimise the scar. However, on the chest, shoulders, back, arms and legs, scars can be bumpy, stretched out, be thickened or more noticeable.

You should avoid physical activities that put a strain on any stitches for the first 2 to 3 weeks. Straining the stitches may lead to the wound opening. This could affect how well it heals and how it looks once it has healed

Some stitches are 'dissolvable', others are not. You will be told what type you have had before you leave. If you have dissolvable stitches in, you can usually start massaging the scar with vaseline.

After your stitches have been removed, (if they are non-dissolvable) massage the scar gently twice a day with a non-fragranced moisturiser (e.g. Vaseline).

This will help improve the way it looks. You may develop a slight reaction to stitches under the skin, which will make the scar feel lumpy. This will settle in time.

Numbness

Numbness can occur in the area of the scar and is often particularly noticeable in wounds that are on the forehead. Usually this will improve over time but can last up to two years or longer (in rare cases).

Closure of your wound(s)

Υοι	u have had a procedure where:
	Stitches were used.
	Stitches were not used.
	Some or all the wound is left open to heal.
	Steristrips were used.
	Medical staples were used.
	Your stitches / staples will need to be removed in the Dermatology department in days.
	Please make an appointment with your GP's practice nurse in days to have the stitches/staples removed. If your wound was closed with staples; we will provide you with a staple remover to give to the practice nurse.

Please take this leaflet with you when you have your stitches removed and show it to the person removing your stitches.

Information for your practice nurse/doctor

If you suspect an infection, please swab the area before prescribing an antibiotic. Please also contact the Dermatology department to let us know (see the next page for contact details).

Thank you for continuing the care of this patient.

Diagnosis/Treatment/Procedure:
Date seen in Dermatology Outpatients:
Type of suture used:
Number of sutures:
Removal of sutures (days):
The following dressing is recommended/applied:
Additional information:
Follow-up appointment with Dermatology (if applicable):
Results and wound review.
Wound review.
To be decided after results.
No follow up required.

How to contact us:

Dermatology (Procedure Suite Nurses Station)

Telephone: 01865 228 241 or 01865 228 280

(8.00am to 5.00pm, Monday to Friday)

Please leave a message with your name and contact number.

If you are worried and you want urgent advice outside office hours, please contact the **On-call Dermatology Registrar** by calling the Oxford University Hospitals switchboard on the number below between these times:

5.00pm to 9.00pm, Monday to Friday.

9.00am to 9.00pm, Saturday and Sunday.

Telephone: 0300 304 7777

Other than these times, please contact 111 or attend your nearest A&E Department.

Further information

If you would like an interpreter, please speak to the department where you are being seen.

Please also tell them if you would like this information in another format, such as:

- Easy Read
- large print
- braille
- audio
- electronic
- another language.

We have tried to make the information in this leaflet meet your needs. If it does not meet your individual needs or situation, please speak to your healthcare team. They are happy to help.

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Oxford University Hospitals NHS Foundation Trust

www.ouh.nhs.uk/information



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