



Surgical Post Operative Instructions

Post- Operative Wound Care

Taking meticulous care of your surgical wound is critical for avoiding complications and achieving the best cosmetic outcome. Leave your pressure dressing in place for 24-48 hours. Do not get the bandage wet. Then care for the wound daily as follows:

1. Wash your hands with soap and water prior to changing the dressing.
2. Remove the dressing. If the dressing is stuck to the suture line, loosen it by soaking with a generous amount of sterile saline, soapy water, or hydrogen peroxide (however, avoid hydrogen peroxide on open un-sutured wounds).
3. Clean the incision with sterile saline or soapy water using Q-tips to remove any drainage or crusting.
4. Pat the incision dry with clean tissue or paper towel.
5. Using a Q-tip, apply a generous layer of ointment (Polysporin, Bacitracin, Aquaphor, or Vaseline; avoid Neosporin as it may cause allergic skin reactions).
6. Cover wound with a bandage or a Telfa non-adherent dressing cut into the shape of the incision. Use paper tape to secure the Telfa dressing in place.

General Post-Operative Care

- You may bathe and shampoo normally after the bandage has been removed.
- Avoid swimming and hot tubs until the wound has completely healed, in about 2-3 weeks. If you must get it wet, use a waterproof bandage such as Nexcare or Opsite.
- Physical activity: No heavy lifting for 3 days, no strenuous activity for two weeks.
- You may have itching as the wound heals. Extreme itching is rare but can be effectively treated with a local cortisone injection.
- If you develop what looks like a pimple over the suture line, this is likely a “spitting stitch.” This is the body rejecting the buried suture rather than dissolving it. It is not of concern, and it heals on its own within a few weeks.
- You may have temporary numbness around the surgical site. Complete healing of the surgical scar and nerve re-growth takes place over 12-18 months. In rare instances, the numbness may be permanent.
- The healing surgical site will be pink and thickened during the first few months, this is normal. In the rare case of continued swelling or contour irregularities, we may recommend one minute of daily firm massage over the scar with Vitamin E or Mederma cream (available over the counter in the wound care section).

Possible Complications & How to Prevent Them

Discomfort:

- Most of our patients experience little or no post-operative discomfort.
- You may take Tylenol (acetaminophen) 2 tablets every 4-6 hours as needed for pain control for two weeks following your surgery.
- Avoid aspirin, ibuprofen, or Aleve.

Swelling and bruising:

- You may use ice compresses over the area, which will help minimize any swelling. Place ice in a plastic bag (or frozen bag of peas) and wrap with a towel. Ice should be applied for only 15 minutes at a time, and can be repeated hourly.
- If you had surgery on your hand/arm/leg, keep the area elevated as much as possible for the first 24 hours to minimize swelling.
- If you had surgery on your face/head/neck, sleep with two pillows under your head.

Bleeding:

- For mild bleeding, apply direct pressure with your fingertips over the dressing for 10-15 minutes. If the bleeding has thoroughly soaked through the dressing, remove the dressing and apply firm pressure with your fingertips over clean gauze for 15-20 minutes, continuously with no peeking.
- If the bleeding does not stop, please call the office. If you are unable to reach the doctor, please go to the nearest emergency room.

Infection:

- Infection is not common when the wound is properly cared for.
- If you have any of the following signs of infection, please call our office: fever, increasing pain, redness, or swelling, yellow milky pus or malodorous drainage.
- If you were instructed to take an antibiotic, continue taking it as prescribed.

Future Visits

- Most patients return for suture removal with a care team member in 1-2 weeks.
- In 2 months, Dr. Zand will see you to evaluate your wound healing and answer any questions.
- After a BCC or SCC diagnosis, we will see you for a full skin examination every 6 months for 3 years, then yearly if no new cancers are diagnosed.
- After a melanoma, we recommend full skin examinations every 3 months for the first year, every 6 months for the following 2 years, then yearly.

Dr. Zand and all of our team look forward to taking great care of you!