Taking Care of Your Wound:

Your dressing should remain in place until the day after the procedure. If the dressing becomes loose before then, replace it carefully.

Cleanse the wound or suture line twice daily with soap and water. Wash your hands prior to touching your wound. Use a cotton-tipped swab (Q-tip) to remove dried blood or crust. Pat dry gently. Apply a thin layer of Vaseline or aquaphor ointment over the wound and cover with a new Telfa pad (non-stick dressing) or bandage. Avoid using ointments containing neomycin (Neosporin) because they may cause itching or redness in some people. The first day the wound may be tender and bleed slightly or seep a small amount of clear liquid.

Keep the surgical site elevated. If the wound is on the face, head, or neck AVOID STOOPING OR BENDING, AVOID STRAINING WITH BOWEL MOVEMENTS, AND SLEEP WITH AN EXTRA PILLOW TO ELEVATE YOUR HEAD.

What to Expect:

To avoid causing bleeding in the first day or two following surgery, do not move the affected area too much. The pressure of the bandage should help to prevent bleeding, but a small amount of blood on the dressing is normal. If bleeding seems persistent, apply pressure firmly and steadily over the dressing for 15 to 20 minutes. This will usually stop the bleeding but if it does not, call our office promptly.

In addition, there may be swelling and bruising around the wound, especially if your face or the area around your eyes was treated. To minimize this, the day after surgery you may apply an ice pack over the dressing every 2 to 3 hours for 15 to 20 minutes. Be careful not to get the dressing wet. The wound may feel numb for several weeks, but this most always resolves with time.

After surgery, the suture line and wound edges will appear pink and red in color but the area will lighten every day. Once the sutures are removed, the incision line and suture marks will continue to fade over weeks to months. In rare instances, a wound may heal with a thickened scar. This usually occurs in patients with a prior history of poor healing but is also dependent upon the location of your incision.

If you develop a fever or chills or the wound becomes increasingly inflamed, warm, or contains pus, please call our office.

Managing Pain

Post-operative pain is usually minimal. Take 2 tablets of extra-strength Tylenol every 4 hours as needed. Dr. Hurst can prescribe a stronger pain medication should you require it. Do not take products containing aspirin or ibuprofen because they may increase bleeding. An ice pack can lessen pain as well. Post-operative pain usually resolves within the first week following surgery but you may experience discomfort in and around the wound as it heals over the next several weeks.