

Ada West DERMATOLOGY

Diseases of the Skin, Hair, Nails, and Skin Cancer Treatment

Mohs Surgery
Phone: (208) 884-3376

Daniel Winchester, MD

Leave bandage on and dry until _____.

WOUND CARE INSTRUCTIONS FOR WOUNDS HEALING IN ON THEIR OWN

GENERAL INSTRUCTIONS:

**If you
bleed**

- ◆ Do not be surprised if you see a small amount of blood-tinged drainage. If your dressing becomes saturated with bright, red blood, remove the dressing. Then use clean gauze to apply gentle, but firm direct pressure to the wound for 10 minutes (no peeking). If the bleeding has not stopped apply pressure for another 10 minutes. **If the bleeding has not stopped after 20 minutes, call our office at (208) 884-3376 or the Emergency Contact Information below.** If the bleeding stops, then clean and redress the surgical site.
- ◆ Avoid alcohol for 24-48 hours after surgery.
- ◆ After surgery, it is common to experience some mild swelling, redness, and itching around the wound. There should only be a small amount of bloody drainage and you may have a low fever (99° to 101° F.)

**Pain
Control**

- ◆ Acetaminophen (Tylenol) 500mg 1-2 tabs by mouth every 4-6 hours. Do NOT take more than 6 pills in a 24-hour period. Continue to take every 4-6 until you feel little to no pain at the end of dosing interval.
- ◆ The alternating regimen with Acetaminophen (500 mg) and Ibuprofen (600mg)
Within 1 hour of surgery: Acetaminophen 500mg
3-4 hours later: Ibuprofen 600mg
3-4 hours later: Acetaminophen 500mg
3-4 hours later: Ibuprofen 600mg
-Continue to alternate until you feel little to no pain at the end of a dosing interval.

Only take these if you have been told that they are okay for you, as some patients may not take them due to preexisting medical conditions (i.e. Patients on Warfarin cannot take ibuprofen.)

- ◆ Typically Tylenol and Ibuprofen are enough to manage post-operative discomfort, but depending on location or size Dr. Winchester may prescribe a mild narcotic. If this narcotic also contains acetaminophen do NOT take additional acetaminophen.
- ◆ If your surgical site is on the leg, elevate as much as possible.

**Ice the
area**

For the first 48 hours you may apply an ice bag to the surgical site every few hours while you are awake. Apply the ice bag about 20 minutes at a time **over the top of your dressing**. A bag of frozen vegetables (peas or corn) works very well also.

If prescribed an antibiotic please take as directed and complete the full course.

- ◆ Keeping your wound clean and moist will prevent a thick scab from forming. This is important because a thick scab will impair wound healing and may lead to a more noticeable scar.

CLEANING AND PUTTING A NEW DRESSING ON YOUR WOUND (After 2 nights):

<p>Clean and re-bandage the wound</p>

- ◆ *ALWAYS WASH YOUR HANDS PRIOR TO CHANGING YOUR DRESSING*
- ◆ After 2 nights you may get the wound wet in the shower. Keep the dressing in place while bathing. Remove the dressing immediately after bathing and gently clean the wound as described below. Do not soak the wound in the tub.
- ◆ Carefully remove your dressing and begin daily cleaning and dressing of the wound using plain water. You may also use plain water and mild soap such as Dove® liquid, baby shampoo, or Cetaphil® cleanser to gently wash the area. You should use a cotton tip applicator (Q-tip®) or clean gauze to clean the wound. Dip the Q-tip® into the plain or slightly soapy water. Gently remove any dried blood or excess crust by rolling the cotton tip applicator or gauze over the wound. Do not place a used Q-tip® back into the water. **Do not use cotton balls. Do not use alcohol or peroxide unless otherwise instructed.**
- ◆ After cleaning, apply a thin coat of Vaseline® or Aquaphor®. Then apply a new thin bandage (Band-Aid® or non-stick gauze and paper tape).
- ◆ Change the dressing at least once daily; however, if you get sweaty or the wound gets dirty then repeat the cleaning process and apply a new dressing.
- ◆ Keep ointment and a dressing on the wound at all times until the wound heals (typically 3-6 weeks).
- ◆ If a scab forms allow it to fall off on its own. Keep dressing the wound and keep it moist with Vaseline® or Aquaphor®. Do NOT pick the scab off.
- ◆ Sometimes stitches are placed to make the wound smaller. If you see stitches in the wound, they will dissolve in 10-14 days.
- ◆ After using Vaseline or Aquaphor for a week, switch to a white, unscented cream such as Cerave, Cetaphil, or Eucerin.

FOLLOW-UP CARE:

- ◆ Return to your general dermatologist for all other skin problems, including a skin exam in 6 months, and every 6 months after that for the next 2 years.

CALL THE DOCTOR IF YOU NOTICE:

- ◆ Bright red bleeding from your wound that does not stop after applying gentle, direct pressure for 20 minutes.
- ◆ A large, swollen, tender, purple area around either surgery site (hematoma).
- ◆ Redness or swelling that lasts more than 4 days.
- ◆ Tenderness, warmth, or red streaks around the wound.
- ◆ Increased bloody drainage, green or yellow drainage, or a foul smelling drainage from your wound.
- ◆ A fever greater than 101 degrees F that continues after 3 days.
- ◆ **If you have any questions or concerns, please our Mohs office at (208) 884-3376.**
- ◆ **For after-hours emergency, call Dr. Winchester's cell phone at 208-991-3685**

- ◆ If you are unable to reach Dr. Winchester please go to your local hospital emergency department.

Care of your scar to get the best possible outcome:

A scar is considered new for the first year. The majority of healing and scar improvement occurs within the first 2-3 months, but the scar will continue to soften and improve in appearance over years.

Sometimes scars require revision (laser, dermabrasion, surgical revision) to get the desired outcome. This decision is typically made after allowing the scar to improve for a few months on its own.

If after 2-3 months you do not feel that the scar has healed to your level of satisfaction, please call for an appointment and we will assess the scar and determine if revision would be helpful.

Remember that skin type and the healing response of the individual will impact the healing and appearance of the scar.

These are some steps you can take to improve the appearance of the scar (to help Mother Nature along).

Sunscreen: It is very important to protect your new scar from the sun. A new scar that is exposed to the sun can pigment (red- brown or even purplish color). The best way to avoid this is to protect the scar from ultraviolet light. This can be accomplished with bandages, sunscreen, or protective clothing and hats. An SPF of 30 is recommended and must be reapplied every 2-3 hours.

Steri-strips: Depending on the location and degree of movement of the site, we may apply steri-strips to the site. You can gently wash the site right over top of the steri-strips. Do not worry if they fall off, they are only meant to be on the site temporarily.

Scar improvement creams/bandages: My experience has shown that no scar cream is a miracle worker. Scars will improve in time with or without creams. If you choose to try a scar cream that is up to you.

Place your cell phone on camera mode and scan QR code for an instructional video on how to care for your wound.

