

---

## **SKIN GRAFT**

### **POST-OPERATIVE INSTRUCTIONS**

## **INTRODUCTION**

Excision of skin cancer with repair of the associated skin defect with a full thickness skin graft is a procedure performed either in our office or at an outpatient hospital. A local anesthetic (injection), sedation and/or general anesthesia may be utilized, depending on the size and reconstructive needs.

## **POSTOPERATIVE CARE**

### **Medications**

Dr. Lewis may prescribe a prescription pain medication. This prescription medication is usually Norco, which is a hydrocodone and Tylenol combination. While taking this prescription medication, do not take additional Tylenol. Avoid Aspirin and NSAIDS (Advil or Aleve) for the first five days after the surgery, unless otherwise directed.

### **Surgical Sites**

In this surgery, an appropriately sized piece of skin is removed from one location on your body and is then used to replace the skin in another location. You will likely have two surgical sites, the site of the graft (where the graft was placed) and the donor site (the site where the skin graft was removed).

### **Dressings: The Graft**

The skin graft is held in place with a yellow bolster dressing; this dressing applies pressure to the graft to keep it stable and to keep blood from accumulating beneath the graft. That graft will heal in place over the three to four weeks following surgery, but the first five days are the most critical for the survival of the graft. When the bolster dressing comes off, there will be a depressed area where the bolster was holding pressure. This will start to resolve after a few days and will continue to improve over time. The bolster is usually removed after one week. While this bolster is in place, please remember that it is not to get wet. If there is drainage of blood on the skin surrounding the bolster, clean it off with a mixture of equal parts hydrogen peroxide and tap water.

### **Dressings: Donor Site**

The donor site will have a dressing that can be removed the day after surgery. This dressing may include steri strips or skin sutures. Instructions for care are below.

### **Steri Strips**

Steri strips are small pieces of surgical tape that help support the wound as it is healing. A larger dressing will be placed over the steri strips; this dressing can be removed the next day and will not need to be replaced unless there is drainage from the wound. Leave the steri strips in place until they fall off or until your return visit. If the ends of the steri strips begin to curl up, do not pull them, as you could open the wound; snip the ends off with some scissors. The sutures underneath the steri strips will dissolve over time.

### **Skin Sutures**

If there are sutures on the skin, blue or black, they will need to be removed 5 - 14 days after the procedure. The point in time that these sutures are removed depends upon the location of the incision on your body.



## Incision Care

- Shower or cleanse the incision with soap and water daily.
- From a new jar, you should apply Vaseline ointment to the incision two to three times a day, just enough to keep the incision moist.
- If there is a scab or crust on the incision, clean the incision using a Q-tip dipped in a mixture of equal parts hydrogen peroxide and tap water.
- If there is no scab or crust, you should not use this hydrogen peroxide mixture. Only apply the Vaseline after cleaning the wound.

## Bathing

You may not shower or bathe until the yellow bolster dressing is removed. It is very important to keep the skin graft dry. You may shower after the bolster is removed, usually five to seven days after the surgery.

## Activity

You will need to stop strenuous activity for a week after the procedure. In most cases, you can resume normal activity the day of surgery.

Dr. Lewis will give you more specific limitations if needed. Direct physical contact to the surgical site, except what is needed for wound care, should be avoided.

## FOLLOW-UP APPOINTMENTS

If your surgery is scheduled to be done in our office, your follow-up appointment will be scheduled before you leave the office that day. If the surgery is to be done under anesthesia in an outpatient facility, you will need to call our office the day after the procedure to schedule your follow-up appointment.

## CALL DR. LEWIS IF:

- Increasing swelling underneath the wound
- Fever greater than 101 degrees Fahrenheit
- Purulent discharge (pus) coming from the wound
- Increasing redness around the wound

---

Please do not hesitate to ever contact our office

**804-267-6009**

