Instructions for Before and After Skin Graft Surgery

<u>What to expect</u>: You may expect to have soreness, bruising and swelling for several weeks. You may notice drainage on the dressings for a few days.

<u>*IMPORTANT*</u>: If you are currently taking any type of birth control, the antibiotics given during and after surgery may interfere with the effects of birth control. You should use a second method for one month post-surgery.

SIX WEEKS BEFORE SURGERY: Your surgeon may request you abstain from smoking and all tobacco/nicotine products for 6 weeks before and 6 weeks after surgery. Failure to abstain from tobacco/nicotine may result in your surgery being postponed or canceled as this complicates the healing process.

TWO WEEKS BEFORE SURGERY: Discontinue Aspirin and Aspirin-like products, ibuprofen (Motrin/Advil), Naprosyn (Aleve), Vitamin E, Omega-3, Omega-6, Flaxseed Oil, weight loss supplements (both over the counter and prescription) and certain herbs like Ginko Biloba, St. John's Wort, and Ephedra. Have other vitamins or herbs cleared with our office. You may take Tylenol (acetaminophen), as directed, at any time prior to surgery.

*****MAOI medications** – You MUST be off any MAOIs for a total of 10 days prior to surgery. Contact your prescriber to be instructed on tapering off the medication prior to surgery.

DAY OF SURGERY: Do not eat or drink anything after midnight the evening before surgery, unless otherwise directed by the anesthesiologist.

AFTER SURGERY CARE:

- Your greatest discomfort usually occurs the first 24-48 hours after surgery. During this time, take all medications prescribed by your surgeon as directed. It is helpful to take pain medication with bland food to avoid nausea, which may occur if taken on an empty stomach.
- Contact the office before taking any Aspirin, ibuprofen (Motrin/Advil) or Aspirin-like medications. You may take Tylenol, if you are not taking a pain medicine that already contains Tylenol (acetaminophen), such as Percocet (oxycodone) or Norco (hydrocodone).
- Eat easily digestible foods such as Jell-O, ginger ale or soups. These are tolerated well the first 24 hours after surgery. If you are not experiencing nausea, you may resume a normal diet.
- Drink plenty of non-caffeinated beverages and eat fruit and food high in fiber to avoid constipation. Should constipation occur, discontinue pain medication (if tolerated). For relief, you may try magnesium citrate (purchased at your local pharmacy) or prune juice. It may take up to 24 hours to produce a bowel movement. These treatments may be repeated as needed.

AFTER SURGERY ACTIVITY AND HYGIENE INSTRUCTIONS:

- No lifting over 10-15lb. until cleared by your surgeon.
- When at home, take frequent rest periods you may walk for short distances, as walking is important to prevent clots from forming in your legs. As you increase your activity, let comfort be your guide. If it hurts, don't do it.
- Do not resume jogging, aerobics, sexual or vigorous activity until cleared by your surgeon.
- No heavy household chores (laundry, vacuuming, sweeping/mopping, etc.) until cleared by your surgeon.
- No showering allowed for split-thickness skin graft (STSG), sponge-bathe only until hospital follow-up.
- While taking pain medicine, have someone assist you with daily activities, particularly personal hygiene.
- Avoid vigorous activities that require pushing, pulling and/or lifting heavy objects.
- As you heal and soreness subsides, let pain be your guide for your activity level. If it hurts, don't do it.
- Check with your surgeon before returning to work, particularly if your job requires heavy lifting or vigorous activity.
- You may drive if you have not taken prescription pain medicine in 24 hours or more. If you have pain with range of motion, you may choose to have a driver until you have good range of motion without pain.
- Avoid sunbathing for 4-6 weeks or until cleared by your surgeon.
- Do not smoke for 6 weeks as smoking delays the healing process.

WOUND CARE:

- You may have two dressings for STSG, one for the graft site and one for the donor site. Leave these dressings in place until your follow up with your surgeon, or you may call the office for further instructions. It is normal for the clear Tegaderm dressing to pool blood. If Tegaderm dressing starts to leak blood, please reinforce edges with tape or call the office to schedule a nurse visit for assistance.
- Ace wrap, gauze wrap (Kerlix), and ABD pad may have been applied on top of Tegaderm dressing to apply compression. If wrapped dressings become too loose or tight, okay to adjust as needed, but keep extremity wrapped until hospital follow-up.
- Further wound care will be discussed at hospital follow-up once all surgical dressings are removed.
- DO NOT PUT ANYTHING ON YOUR INCISIONS UNLESS INSTRUCTED BY YOUR SURGEON!

NOTIFY YOUR SURGEON IF:

- You have a fever greater than 101 that lasts more than 24 hours.
- You develop excessive swelling, redness or warmth of incisions.
- You experience severe pain not responding to pain medication.
- You develop thick, odorous drainage or bleeding that does not subside.
- You experience shortness of breath.

If you have concerns after hours, contact our office at 417-875-3246 and an operator will page the on-call surgeon for you.