



Post-operative wound care instructions

Wounds with sutures (no steri strips)

- Leave pressure dressing in place for 2 days; keep the bandage dry
- After 2 days, you may remove the bandage and get the wound wet
- Ok to gently clean the wound with soap and water. You can let the water run over it in the shower (avoid direct stream of water hitting the wound)
- Apply a thin layer of petroleum jelly (Vaseline) using a cotton-tipped applicator (Q tip) twice daily. Do not use antibiotic creams (neosporin, bacitracin, polymyxin, triple cream, etc) as they may cause allergic reactions, which can be mistaken for infection.
- Keep covered with a small dressing (non-stick gauze and paper tape) for 4 days. Ok to remove before showering. Wounds usually heal fastest when kept covered with ointment and a bandage.

Wounds with sutures and steri strips

- Leave pressure dressing in place for 2 days; please keep the bandage dry
- After 2 days, you may remove the bandage and get the wound wet
- The steri strips should fall off around 7 days after surgery
- After the steri strips fall off, apply a thin layer of petroleum jelly (Vaseline) using a cotton-tipped applicator (Q tip) twice daily. Do not use antibiotic creams (neosporin, bacitracin, polymyxin, triple cream, etc) as they may cause allergic reactions, which can be mistaken for infection.
- Keep covered with a small dressing (non-stick gauze and paper tape). Ok to remove before showering. Wounds usually heal fastest when kept covered with ointment and a bandage.

You have sutures that will need to be removed in ____ weeks

Wounds healing without sutures (granulating wounds)

- Leave pressure dressing in place for 2 days; please keep the bandage dry
 - Leave hydrocolloid (Duoderm or other) dressing on for 7 days after surgery
 - After 7 days, remove hydrocolloid dressing and apply a thin layer of petroleum jelly (Vaseline) using a cotton-tipped applicator (Q tip) twice daily.
 - Gently clean with soap and water daily (no direct stream of water)
 - After the hydrocolloid dressing comes off, keep the wound covered with a dressing (non-stick gauze and paper tape). The dressing can be removed before showering. Wounds usually heal fastest when kept covered with ointment and a bandage.

Skin graft wound care



Post-operative wound care instructions

- Leave the original bandage in place for 7 days; keep it dry during this time
 - We will remove the bandage at your 1 week follow-up appointment
 - After we have removed the original bandage, apply a thin layer of petroleum jelly (Vaseline) twice daily.
 - Gently clean (lightly pat) the site daily with soap and water; no direct stream of water
 - Keep covered with petroleum jelly and a dressing (non-stick gauze and paper tape) for 2-3 additional weeks
 - Avoid smoking cigarettes or overexerting yourself, as these can cause the graft to not survive. If the graft does not survive, we will likely still leave it in place to serve as a biological (natural) dressing.

Dilute vinegar soaks

- Mix equal amounts of white vinegar and water (1:1 ratio)
 - Soak gauze or a clean wash rag with the vinegar/water mixture
 - Gently pat wound with mixture or leave it sitting on wound for 10 minutes
 - Pat dry, then re-apply petroleum jelly and bandage

For Pain: Take 400mg ibuprofen and 1000mg acetaminophen **at the same time** every 8 hours as needed. Research has shown that this combination is as effective as opioid pain medication.

- We have prescribed additional pain medication that you can take in addition to the ibuprofen and acetaminophen

For Bleeding: The bandage applied before you left the operating room is a pressure bandage and should be left on for 24-48 hours. Some blood tinged oozing might occur. If you experience oozing of blood from the wound, sit still and **apply constant pressure to the area for 20 minutes** (no peeking or the wound will start bleeding again!)

Call the office (205-838-1811, ext 4; after hours ext 9) if you have:

- Severe itching under the bandage with a rash: this usually indicates sensitivity to the ointment or bandage tape.
- Fever, extreme or a significant increase in pain after 4 days, or pus draining. Clear yellow/orange/faint red drainage is normal; thick cloudy drainage needs to be evaluated. The base of deeper wounds may develop a whitish/yellowish layer of fibrin (does not wipe off), which is normal for many wounds.
- The wound will not stop bleeding after 40 minutes of firm, constant pressure

Supplies needed: petroleum jelly (preferably from a tube, not a jar) or aquaphor (Eucerin) or mupirocin (by prescription only), non-stick gauze pads (Telfa), and paper tape (Micropore).