

Minor Skin Surgery Under Local Anaesthetic

Patient information and aftercare • Waterfront Private Hospital

Wound care as your surgeon advises • stitches usually out at 7–14 days • results in about 3 to 4 weeks

This leaflet is for anyone having a skin lesion sampled or removed under local anaesthetic at Waterfront. It sets out what usually happens, so you know roughly what to expect.

Every wound is different. Your surgeon will give you instructions that suit your wound and where it is, and those always come first. If something here does not match what you were told, follow what you were told, and ring us if you are not sure.

Who to contact

Office hours: 0131 376 3785	Out of hours: 07405 322689	NHS 24: 111
Mon–Fri, 9am–5pm. Non-urgent questions: hello@waterfronthospital.co.uk	Evenings, weekends and holidays	If you cannot reach us

When to get in touch

Ring us	Redness spreading from the wound, or the skin feeling hot Yellow or green discharge, a bad smell, or the wound edges coming apart Pain getting worse rather than better after the third day A temperature above 38°C, or a reaction to medicine we have given you Bleeding that has not settled after two rounds of 30 minutes of firm pressure
Normal	A little blood or clear fluid on the dressing in the first day or two Bruising and swelling, especially on the face Tightness, itching or numbness around the wound A scar that stays red and raised for the first few months

Ring us in office hours, or the out-of-hours number in the evening or at the weekend. NHS 24 on 111 if you cannot reach us.

Before your appointment

- Eat and drink as normal. Keep taking your usual medicines unless we have told you otherwise.
- Bring someone with you for surgery to the face, head, neck or hands. You may not be able to drive home, and a dressing near the eye can block your vision.
- Tell us beforehand if you take a blood thinner such as aspirin, clopidogrel, edoxaban, rivaroxaban, apixaban, dabigatran or warfarin, and please do not stop any of them yourself. On warfarin, have your INR checked two days before, ideally below 3, and bring your anticoagulation book.
- Tell us about diabetes, epilepsy, a bleeding disorder, a pacemaker or any implanted device, and any allergy, especially to antibiotics, dressings, latex or local anaesthetic.
- Smoking slows healing, so stopping for a couple of weeks either side gives the wound the best chance.

What happens on the day

Local anaesthetic is injected into the skin. It stings for a few seconds, then the area goes numb, so you should not feel pain, though you may still feel pressure. The lesion is then sampled or removed. Most wounds are closed with stitches, often with a dissolving layer underneath. Some are dressed and some are left open, depending on the site. Antibiotics, by mouth or as an ointment, are used where there is a reason to, and we will tell you if so.

Looking after your wound

When	What to do
First 48 hours	If you have a dressing, the usual advice is to keep it in place and dry for about 48 hours. Some wounds, on the scalp or brow for instance, are left without a dressing, and you may be told you can shower straight away and simply apply a little antibiotic or plain ointment. Your

	surgeon will tell you which applies to you. Take it easy. Bending down and hot drinks can restart bleeding from face wounds, so extra pillows help, and put your leg up for leg wounds. Best to skip alcohol on day one.
The first week	Once the wound can be left open, wash it gently once a day, pat dry, and apply a thin smear of whatever ointment you were given. Keep it covered with a simple dressing if you prefer. Most people are back to office work the next day. If your job is heavy, dirty or wet, have a word with us first.
Stitches	Usually removed between 7 and 14 days, depending on the site. We arrange this appointment and remove them here at Waterfront, so there is no need to involve your GP. Some stitches dissolve and need nothing done. Be gentle with the wound for a few days afterwards, as that is when it is weakest.
Getting back to it	Gym, sport and heavy lifting once the wound has healed over and feels comfortable, usually two to four weeks. Wounds on the lower leg take a good deal longer, which is normal and nothing to worry about. Avoid swimming and hot tubs for at least six weeks.
3-12 months	All skin surgery leaves a permanent scar. It stays red for three to six months, fades towards white, and keeps improving for about a year. Sunscreen on it for the first year makes a real difference to how it ends up.

Pain relief and bleeding

- The anaesthetic wears off after two to three hours. Two paracetamol 500mg every four to six hours is usually plenty, up to eight tablets in 24 hours. Check nothing else you take, such as a cold remedy, also contains paracetamol.
- It is better to avoid aspirin and ibuprofen (Nurofen) in the first day or two, as they can encourage bleeding, unless you take them regularly for another reason.
- A little bleeding in the first few hours is common. Press firmly and steadily over the wound for a full 30 minutes without lifting to look, as that stops it clotting. It nearly always settles; if not, ring us.

Laboratory results

Not every lesion is examined under the microscope. Where there is no diagnostic question, a straightforward cosmetic removal for instance, it may not be sent at all, and your surgeon will tell you on the day. Where it is sent, results usually take three to four weeks, occasionally longer if further tests are needed. Every result is reviewed by your consultant before release, so we can explain what it means and what, if anything, happens next. We will then write, telephone or arrange an appointment. If you were expecting a result and have heard nothing after four weeks, do ring rather than sitting worrying.

The procedures we do

Biopsy or excision	A small round piece (punch), part (incisional) or all (excisional) of the lesion is removed and the skin closed with a few stitches.
Wide local excision	A further margin of normal-looking skin is taken from around an earlier scar, to be certain nothing was left behind. Your consultant will have explained why it is needed.
Skin graft	Skin from another area, often near the ear or collarbone, is trimmed to fit and stitched in. Both sites are dressed, sometimes with a dressing stitched onto the graft.
Skin flap	Skin from beside the wound is moved across and stitched into place. It keeps its own blood supply, so it heals well and matches for colour.
Healing on its own	The wound is left open to close on its own. This often gives a very good result and avoids bigger surgery, but needs regular dressings for several weeks.

If anything is worrying you, ring 0131 376 3785. It is always better to ask.