

Helping your wounds to heal

Reduce or stop smoking for at least 2 weeks before and 2 weeks after surgery. Smoking reduces the amount of oxygen carried by the blood and causes narrowing of the blood vessels. It also weakens the immune system, increasing the risk of infection.

Things to watch out for

If your wound becomes red, swollen or more painful, this could be a sign that there is a problem. Please contact us or your GP for advice.

Further information

Visit the British Association of Plastic Reconstructive & Aesthetic Surgeons website www.bapras.org.uk/public/patient-information

Contact us

**Plastic and Reconstructive Surgery
Clinical Admin Team (CAT 1):**
rbbh.CAT1@nhs.net

Monday-Friday 8.30am-4.30pm

Royal Berkshire Hospital

0118 322 7139

West Berkshire Community Hospital

01635 273390



To find out more about our Trust visit
www.royalberkshire.nhs.uk

**Please ask if you need this
information in another language
or format.**

RBFT Plastic & Reconstructive Surgery,
Reviewed: September 2025
Next review due: September 2027

Shave excision with curettage and cautery: what is it and why do I need it?

Information for patients
who have had plastic and
reconstructive surgery

This leaflet gives advice following your plastic / reconstructive surgery. If you have any questions or concerns, please contact the Plastic and Reconstructive Surgery Clinical Admin Team (CAT 1).

What is a shave excision with curettage and cautery?

This is a surgical procedure to remove a cancerous growth or other lesion. Instead of the wound being closed with stitches, the area is scraped (curettage) and sealed with heat (cautery) afterwards, and the treated area allowed to heal under a dressing. This can be repeated up to three times during the same operation, to destroy any unwanted cells that may be left behind after the shave excision.

Why do I need this procedure?

There are a number of reasons why this treatment may have been recommended, including:

- Your general health and medical history.
- The location and size of the skin cancer.
- to avoid a more complex procedure.

The procedure will be carried out by one of a number of consultants.

Most patients will require only a local anaesthetic. The advantages of this is that you are awake throughout and do not have to fast before surgery.

What are the risks of this procedure?

Risks with this type of procedure are generally rare. Your consultant will discuss the risks with you in clinic and again on the day of your procedure.

Common risks include:

- Bleeding.
- Infection.
- Delayed healing of the wound.
- Scarring.
- Nerve damage (depending on location of surgery).
- Possible need for further treatment.

What type of dressing will I have?

Following the procedure the wound will usually have a simple dressing applied. This may include a paraffin or silicone-based dressing, or a white absorbent (blotting paper-like) layer between the wound and the outer dressing. Alternatively, the surgeon may simply apply an anti-bacterial ointment to the wound instead.

This dressing should stay on for up to a week, depending on instructions given by your consultant after the operation.

What will the wound look like?

The area will look like a small graze or minor burn.

The scab can take a number of weeks to heal slowly.

This area may well be red, scabby and crusty to start, but will slowly settle. Over time the area will become paler and will slightly reduce in size.