

Helping your wounds to heal

Reduce or stop smoking for at least 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.

Time off work after surgery

This will depend on where on your body you have had surgery and what your job entails. Your consultant can advise you of this.

Driving

Your ability to drive following surgery will depend on the location of the wound(s) and the advice given by your surgeon.

Please also speak to your insurance company before resuming driving.

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

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This information can be made available in other languages and formats upon request

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Royal Berkshire
NHS Foundation Trust

Advice following a full thickness skin graft

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 David Garden, Plastic Surgery Nurse Specialist on 07623 911 340 or email david.garden@royalberkshire.nhs.uk, Mon-Fri 8.30am-4.30pm.

A full thickness skin graft, as the name suggests, includes all the layers of skin. The graft is harvested and the donor site is closed in a straight line. It is then secured to the wound with 'stitches'.

Pain / discomfort

If you have had a local anaesthetic then both the area where the graft has been harvested from and where it has been placed will be numb for 4-6 hours. Feeling will gradually return.

If you find your wounds are becoming uncomfortable taking simple pain relief is recommended to prevent the pain becoming too intense. If you are able, take simple Paracetamol regularly for the first 48 hours and then reduce the dose to whenever required. It is best to avoid aspirin and ibuprofen as they can cause bleeding. If you regularly take aspirin for medical reasons

should continue this unless your consultant has advised you otherwise.

If you have had a general anaesthetic feeling tired afterwards is normal. You will also have had local anaesthetic injected into the two graft sites so they may be numb for 4-6 hours. As feeling returns you should also take simple pain relief,

Bleeding

You might notice a little bit of blood staining the dressings. This is normal.

However if the dressing becomes very wet or the blood is coming out from under the dressing, then place another dressing on top of the original one and apply firm pressure for 10 minutes. If the bleeding continues contact us or your GP surgery for advice as soon as possible.

Appearance

The area around your wounds will be slightly swollen and red. This is normal and will slowly reduce. To aid with this we advise you keep the surgical sites elevated (raised up). This will also help reduce the chance of bleeding and any pain you might have.

Head, neck and upper body: Sit as upright as possible and sleep at least 45 degrees if possible (use 3-4 pillows to achieve this).

Arms: Keep your operated arm higher than the level of your heart. Sit with your arm on the arm rest of your chair or on a pillow during the day.

At night, rest the arm on two pillows if you are able.

Legs: Continue to gently mobilise (move around) but do not stand for long periods. When sitting, raise your leg on a foot stool or on a couch with 1-2 pillows. At night, rest your leg on 1-2 pillows.

Dressings

Your full thickness skin graft will usually be secured with a tie-over dressing. This needs to be kept dry and stay in place until you come back to clinic for your first graft check two weeks following surgery.

Your donor site will have been closed with stitches and some skin tape. Unless your surgeon has told you otherwise these are dissolvable and will not need to be removed. The brown tape should be allowed to come off in its own time. This can take up to 2 weeks.

The brown tape can get damp/wet and patted dry. Do not soak or the tape is likely to come off too early.

If you do have stitches that need to be removed, your surgeon may ask you to make an appointment with your GP practice nurse.