



Skin Graft Wound Care Instructions

WHAT DO YOU DO FOR...

WOUND CARE:

- For the **GRAFT SITE**, leave the pressure dressing on for **AT LEAST 2 DAYS & keep it dry**.
 - If instructed to remove the pressure dressing at home, it is important to know that under the pressure dressing **may be** another (potentially yellow) dressing that is sewn into place with stitches. **DO NOT REMOVE ANY DRESSING THAT HAS STITCHES CONNECTING IT TO THE WOUND**. This dressing should stay in place until you return to our office. Only remove the top, likely white, pressure dressing. Not all pressure dressings will have this second, yellow dressing with stitches.
 - Pressure dressings are intentionally tight to decrease bleeding, swelling, and pain.
 - Using a clean, dry Q-tip, gently wipe and clean around the base of the stitched on bandage.
 - Then apply **ONLY PLAIN PETROLATUM** with a clean Q-tip to the edges of the graft site daily, then cover with non-stick or non-adhesive gauze and secure with paper tape.
- For the **DONOR SITE** (which is the place where the skin graft was taken from), leave the pressure dressing on for at least **48 HOURS & keep it dry**.
 - Apply **ONLY PLAIN PETROLATUM** to the surgical site at least once daily to prevent scabbing until stitches are removed. Then cover with a strip of non-stick or non-adhesive gauze and secure with paper tape.
- **General tips:**
 - Wounds that are kept moist heal faster and leave a better scar than wounds that scab over.
 - Do **NOT** use any antibacterial ointment because they can cause allergic reactions (unless instructed by your physician).
 - After 1-2 weeks, it is usually okay to keep the graft uncovered while at home during the day. You can use non-adhesive or non-stick gauze and secure it with paper tape.
 - **Always practice good hand hygiene** - wash your hands thoroughly with soap and water before changing the dressing or touching your wound to apply plain petrolatum. You can also consider using disposable gloves while performing wound care.

PAIN:

- Apply **ice packs** for at least 5-10 minutes out of every waking hour for 1-2 days after surgery directly over the bandages to reduce bruising, swelling and pain. You do not need to apply ice packs while sleeping.
- **Elevate** the surgical sites to minimize swelling.
 - If you had surgery on your head or neck, relaxing in a recliner or sleeping with extra pillows to prop you up may be helpful.
 - If you had surgery on an arm or hand, you can consider using a sling to help.
 - If you had surgery on a leg, in addition to elevation, your doctor may recommend *compression stockings* when you are on your feet.
- For pain/discomfort, we recommend *acetaminophen* or ibuprofen.
 - You may take up to 2 extra strength acetaminophen (1000 mg) and repeat every 8 hours. If you need pain relief in between, you can take 2 ibuprofen tablets (400 mg) and repeat every 6 hours.
 - If your doctor has given you a prescription pain medication, it may already contain acetaminophen and additional acetaminophen should not be taken.
 - **Do not exceed 4000 mg of acetaminophen or 3200 mg of ibuprofen in a 24-hour period!**
- For any non-resolving pain, contact your doctor.

OPTIMAL HEALING:

- Avoid ANY strenuous activity (i.e. heavy lifting, bending over, or exercise) for **anywhere from 1-3 weeks** to minimize bleeding risk and to minimize tension placed on your graft & stitches. Rest is important because your graft needs to form a brand-new blood supply to fully survive.
 - Strenuous activity includes running, weightlifting, biking, yoga, pilates, elliptical, rowing, & stretching.
- **Avoid smoking** for at least 4 weeks as it leads to poor wound healing. Smoking can cause the graft to fail and not survive. It is best to stop smoking overall.

WHAT SHOULD YOU EXPECT...

INITIALLY:

- **Bruising, swelling, and some pain** are expected after surgery. These will typically resolve in 1-2 weeks. Wounds with stitches on the hands, legs, and feet may take even longer to improve.
- Your wound may **feel tight, itchy or numb**, and should gradually improve over several months.
- Your wound may appear **red, raised, or bumpy** because of the internal stitches, which will gradually improve over the course of 3 months as the internal stitches dissolve.
- The surface of your graft may initially look deep purple or even black for 1-2 weeks. **DO NOT try to remove any part of this scab/crust.** Keep the skin graft MOIST with plain petrolatum to ensure that the graft survives. Slowly, over 3-6 weeks, the graft should appear pink. Eventually it will appear more skin-colored.

LONG-TERM:

- Grafts often require 6 to 8 weeks to fully heal. In some cases, it takes longer.
- In terms of your final scar, everyone is different and follows a different time course of wound healing. It may take up to **12-18 months to see what the final scar** will look like.
- Discuss any questions or concerns with your doctor. He/she may make some recommendations to help with the final scar appearance.
- ONLY silicone-based scar products have proven data to support using them (if desired). We do not endorse one brand over another, but examples include ScarAway®, ScarGuard®, and Kelo-cote®. These types of products are easily found in most pharmacies or online. Do not start applying them until at least 2 weeks after your surgery, or unless otherwise directed by your provider. DO NOT use other products like Mederma® or Vitamin E gels.

Undissolved Sutures- On occasion, 4-6 weeks after surgery you may notice small, red, sometimes tender “pimple-like” bumps that may form along your scar. These are “spiting stitches” or suture abscesses and are caused from inflammation and is not an infection. These areas typically resolve on their own but can rupture like a small pimple. If you notice these lesions and they do not settle down after 1-2 weeks, please call our office.

WHAT SHOULD YOU DO IF YOU EXPERIENCE...

BLEEDING:

- The pressure dressing over your wound helps to stop bleeding. Any bleeding that you notice can usually easily be stopped with direct firm pressure. DO NOT remove the dressing, elevate the site, and apply **constant pressure** over the dressing for 20 minutes without checking.
- If the pressure dressing becomes completely saturated with blood or if you experience active bleeding that does not resolve with 20 minutes of pressure, **call your doctor's office immediately.**

CONCERNS FOR INFECTION:

- If you experience signs of infection such as increased redness, swelling, warmth, yellow drainage, or worsening pain to touch, call your doctor's office immediately.
 - Some redness over and along the suture line is normal and expected.

WHAT SHOULD YOU DO FOR LONG-TERM SKIN HEALTH:

- Wear sunscreen (broad spectrum for UVA & UVB coverage and SPF≥30), a wide-brimmed hat, and sun protective clothing to avoid future skin cancers. These also help the redness from the surgical scar fade faster.
- See your dermatologist or physician regularly for a complete skin check. Regular skin checks are important for early detection and prevention of skin cancer.