



Skin Graft - Wound Care Instructions

WHAT DO YOU DO FOR...

Wound Care:

- **For the GRAFT SITE, leave the pressure dressing on for AT LEAST ____ DAYS and 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.
 - Apply **ONLY PLAIN PETROLATUM OR AQUAPHOR OINTMENT** with a clean cotton tip applicator (Q-tip) to the graft site at least **TWO TIMES DAILY FOR AT LEAST 3 WEEKS** (or longer) to prevent scabbing until fully healed.
- **Donor site (from where graft was taken)**
 - **Leave the pressure dressing on for 48 hours and keep it dry**
 - Apply **ONLY PLAIN PETROLATUM OR AQUAPHOR OINTMENT** to the surgical site at least once daily to prevent scabbing until stitches are removed.
- **General tips:**
 - To remove the pressure dressing, it is often easiest to soak it in the shower/bath to loosen the adhesive. Once removed, gently clean the area *with regular soap and water*. You can use baby shampoo when washing your hair for wounds on the scalp.
 - **DO NOT** scrub the area, and **DO NOT** allow the shower pressure to hit the area directly.
 - Keep the wounds covered with a band-aid or you can use non-adhesive or non-stick gauze and secure it with paper tape.
 - Wounds that are kept moist heal faster and leave a better scar than wounds that scab over.
 - Do NOT use any antibacterial ointments because they can cause allergic reactions (unless instructed by your physician).
 - **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 or cotton swabs while performing wound care.

Pain Management:

- Apply **ice packs** for at least 5-10 minutes out of every waking hour for 1-2 days after surgery directly over the bandage to reduce swelling and pain. You do not need to apply ice packs while sleeping.
- **Elevate** the surgical site 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 or foot, in addition to elevation, your doctor may recommend compression stockings when you are on your feet.
- For pain/discomfort, we recommend **acetaminophen** or ibuprofen (unless your other medical providers have advised against taking either or both).
 - 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 3000mg of acetaminophen or 2400mg 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 **at least 3 weeks** to minimize bleeding risk and to minimize tension placed on your graft and 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, elliptical, rowing, and stretching.
- Avoid alcohol for 2 days as this can thin your blood and cause bleeding.
- Avoid smoking for at least 3 weeks as it leads to poor wound healing. 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.
- The more active you are, the more a healing area is likely to swell and potentially cause pain.
- Swelling and discomfort are especially common for healing wounds on the hands and legs as swelling tends to pool in these areas because of gravity.
- 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 **6-12 months to see what the final scar will look like.**
- If you have any questions/concerns, discuss with your doctor. He/she may make some recommendations to help with the final scar appearance.

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 30 minutes without checking.**
- If the pressure dressing becomes completely saturated with blood or if you experience active bleeding that does not resolve with 30 minutes of pressure, **call your doctor's office immediately.**
- Occasionally the underlying stitches do not completely dissolve ("spitting stitch") and can lead to a small bump or spot of bleeding. This usually occurs several weeks after the procedure and requires the responsible suture to be removed in the office.

CONCERNS FOR INFECTION:

- If you experience signs of infection such as fever, chills, sweating, 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 and should improve with time.

WHAT SHOULD YOU DO FOR LONG-TERM SKIN HEALTH...

- Wear sunscreen (broad spectrum for UVA & UVB coverage and SPF30), 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 board-certified dermatologist regularly for a complete skin check. Regular skin checks are important for early detection and prevention of skin cancer.