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Care of Sutured Surgical Sites

Your sutured surgical site will be covered with an absorbent bandage when you leave the office. Leave this initial dressing in place until the next morning. When this main dressing is removed, begin twice-daily care. Often small adhesive strips called Steri-Strips are placed over the sutures under the main dressing. Leave these in place until they fall off (about 3 days), as they provide support for the skin edges. You can do wound care right over and between Steri-Strips.

On the first day, clean the wound gently with soap and warm water. After cleaning, cover the suture line with a film of fresh **Vaseline**. The ointment helps prevent superficial infection and keeps the wound from drying out and scabbing, which slows healing. We prefer Vaseline to antibiotic ointment because some people are allergic to antibiotic ointment.

You will notice swelling of the surgical sites and surrounding tissue, which may last for several weeks. The fluid in the tissues, which causes the swelling, follows the law of gravity and migrates downward. Thus, you may notice bruising below the surgical area. Swelling can be minimized by reducing your activity for a couple of days, by sleeping the first night or two after surgery with the surgical site propped up on a couple of pillows, and by the application of ice or a pressure bandage.

Post-operative pain is usually quite minimal, and can be controlled effectively with Tylenol. If Tylenol does not alleviate your discomfort, please call us. Please avoid aspirin, ibuprofen (Motrin, Advil and others), naproxen and alcohol, since these may increase bleeding.

It is not uncommon for wounds to ooze a small amount (a few drops) of fluid or blood in the first 24 hours. The bandage will absorb this, and you may see a spot through the dressing. However, if your wounds should bleed enough to actually soak the dressing, please call and let us know. In almost all cases, steady, gentle pressure will control any bleeding that occurs. Most bleeding occurs in the first 48 hours post-operatively, before the tiny local blood vessels have knit. For this reason, it is a good idea for the first couple of days not to participate in activities vigorous enough to raise your blood pressure (for example, mowing the lawn or picking up a box of groceries), leaning over forward (the blood rushes to your face), or any activity which causes movement across the sutured area. After two days you can usually resume normal activity.

Infection is rare (under one percent), since all wounds with sutures are closed under sterile conditions. If it should occur, infection is heralded by increasing tenderness, warmth, swelling, drainage, and redness, usually on the third or fourth post-operative day. It occurs more commonly in wounds in which bleeding occurs under the sutures. If you think your wound is infected, please call us.

Sutures will be removed in 5-7 days on the face, 7-10 days on the neck, and 10-14 days on the trunk and extremities. The wound will usually be pink and a bit puffy at suture removal, and this will gradually diminish over weeks as the wound settles down. Long-term healing takes place under the skin for over a year after the procedure! You may notice numbness around the wound. This is normal, and sensation usually returns almost to pre-operative levels, although sometimes this takes up to two years. You may feel a zing or momentary pain in the wound occasionally, as nerves regenerate around the wound. This is normal and expected.

Occasionally a deep white suture will attempt to work itself out of the skin. Do not pull it out. You may trim it flush with the skin surface or call our office to do this for you.

Please allow 10 days to 2 weeks for our office to contact you with the results.