

## **GENERAL WOUND CARE GUIDELINES**

The following are general guidelines for wound care.

In most instances you will have a bandage over the wound. Leave this in place for at least 24 hours and do not let it get wet or soiled. It is not unusual for some mild bleeding to occur under and around the bandage.

Once the bandage is removed, It is normal for the wound to look swollen, distorted and even bruised at this point. It is also normal for the wound to look a bit raised, like a ridge. This is often done intentionally.

Cleaning the wound after surgery is critical for achieving an ideal result. If you fail to do this properly, it is your fault. If you have questions regarding this, please inquire to the office sooner than later.

The following should be done 2-3 times per day for 5-6 days. Doing this more frequently can and will lead to complications.

During **only the first cleaning session of the day** you should use a Q-tip dipped in dilute hydrogen peroxide. The hydrogen peroxide can be diluted with clean water in a 1:1 ratio. First gently, but thoroughly, clean the skin surface, including the sutures (stitches). A gentle swipe of the saturated Q-tip along the sutures will help remove blood and debris that would, otherwise, accumulate. YOU DO NOT WANT ANY SCABBING TO OCCUR. The endpoint of this step is to not allow anything to accumulate along the sutures. Remove the excess hydrogen peroxide with a dry, clean Q-tip. Then apply a generous layer of Bacitracin ointment using a Q-tip.

The second and third cleaning sessions of day should be done using clean, soapy water instead of the hydrogen peroxide solution. Otherwise, the same method is used for these two sessions in terms of cleaning technique and application of Bacitracin ointment.

If you would like to cover the wound after each cleaning session, you may do so. But we recommend using a 'non-adherent' dressing, such as Telfa. These can be purchased at your local pharmacy.

Sleep with the head elevated 20-30 degrees for 72 hours.

You may get the wound wet in the shower after 48-72 hours. When you do so, use a mild soap or shampoo (such as Baby Shampoo) and allow the lather to gently clean the surface of the skin. Do NOT rub or scrub the wound surface.

Avoid any activity that may pull on the wound. Tension along the wound edges will lead to suboptimal scarring. This should be avoided for at least the first few months.

After the first week of healing, we recommend using a topical silicone gel or an equivalent wound aid. We prefer branded products such as Stratamed and Bio-corneum. But there are plenty of options over the counter at your local pharmacy. These wound aids help optimize your



body's healing capacity and contribute to better scarring. Most patients will continue using these for 3-4 months.

SUN EXPOSURE IS TO BE AVOIDED FOR AT LEAST 12 WEEKS – IF NOT LONGER. A total sunblock containing zinc oxide or titanium dioxide should be applied daily if you are in the sun. Sun exposure may cause certain complications, such as permanent skin discoloration.

Avoid application of makeup on the wound for approximately 10-14 days.

Persistent redness can be seen for weeks to months in some patients. A green-based makeup will help to hide this redness.

Keep in mind that scars will take upwards of one full year (and beyond) to fully heal and mature.

In some cases, Dr. Hilinski may recommend any number of adjunct procedures to help further optimize your healing. This may include laser treatment, steroid injection, and other interventions. Not everyone will need these additional interventions. Dr. Hilinski will make this determination on a case-by-case basis.

Please call the office if you have any questions or concerns.