

Dermatological Surgery Patient Information

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This leaflet gives you information regarding your minor surgery within the Dermatology Department and answers any questions that you or your carers may have following discussion with the doctor at your recent clinic visit.

For enquiries regarding your appointment please contact the Booking Co-ordinator on **01493 453618**

Why have you been given an appointment for minor surgery?

Your doctor has referred you for a small operation (dermatological surgery). We will either need to take a sample of a skin lesion (called a biopsy) to help to make a specific diagnosis of a skin condition or to completely remove a lesion (called an excision) from your skin.

The operation

The operation will be done under local anaesthetic. This means you will be given a small injection around the area being operated on. You will be awake throughout. The injection may be briefly uncomfortable and feel rather like a bee sting. This will only last for a few seconds before the skin becomes numb. You may already be familiar with local anaesthetic for example in dental treatment. If you have ever previously reacted abnormally to an injection of local anaesthetic it is important to tell the doctor.

It is also important to let us know what tablets you are taking especially aspirin, warfarin, clopidogrel, plavix, rivaroxaban or any other blood thinning medication. You will have been asked to have two blood tests if you take warfarin. You must not stop taking your medication without the advice of a doctor or a member of the anticoagulant team.

The length of the operation can vary from 30 to 90 minutes depending on the number and complexity of the procedure(s) planned. Some patients may need more than one lesion removed or more than one sample from a rash.

We advise you NOT to drive home yourself but to get someone to bring you and accompany you home.

What to expect after the operation

Most surgery requires stitches to close the wound. Occasionally you may not have stitches, or they may be dissolving ones. The doctor will explain which type you have. Sometimes the wound is left to heal naturally.

If your stitches are not the dissolving type then they will need to be removed. This will be done by the nurse at your own surgery or by the district nurse, and you will be given a letter and instructions on what to do.

You may have a dressing covering your wound. Instructions of what to do will be given to you after the procedure. We will also give you some instructions on wound care including what to do if bleeding occurs.

Once the local anaesthetic wears off you may well feel a little sore. The pain should respond well to a pain killer e.g. paracetamol.

You should take it easy after your operation and for the rest of the day.

Benefits

The benefits of having dermatological surgery may be:

1. Having a lesion completely removed. This is usually done to remove a skin cancer and this may be the only treatment that is required.
2. To help provide a diagnosis to decide on the most appropriate treatment.

Risks/problems

1. Scarring – Following surgery to the skin there will be a scar. If the surgery is to the upper back, shoulder or chest area there is a small chance that the scar may become raised, thickened or widened over time. In most cases these changes will settle completely over the next 18 months to 2 years. Occasionally a scar will remain bulky and will NOT settle with time. This is called keloid formation, it is of an unknown cause, and unpredictable (unless you have previously had a keloid problem). It is uncommon.
2. Loss of sensation - There may be some loss of sensation in the skin adjacent to the operation. This is more likely if your operation has been more complicated involving a skin graft or skin flap repair. Normal sensation can take many months to return and occasionally reduced sensation may be permanent.
3. Bruising/bleeding - There may be some bleeding and bruising after the surgery particularly if you take aspirin or warfarin tablets or the surgery is around the eyes or nose. The bleeding should settle, and you will be given instruction on this after the operation. The bruising may take several days to resolve.
4. Infection – Occasionally the wound may become infected. This happens in 1 – 2% of cases. You will be given instructions on the signs and symptoms of this. Usually this requires an antibiotic cream or tablet.
5. Recurrence, if a skin tumour isn't completely removed.

Rarer risks

There is a rare risk of nerve injury with certain procedures e.g around the eyes, leading to loss of feeling or movement such as eyebrow/eyelid.

Results

We usually have the results back to the department within 2 - 3 weeks after your operation. On occasions this can be longer resulting in a delay in you hearing from us. You may have a follow up appointment when we will tell you your results or we may write directly to you and send a copy of the letter to your GP.

If your results show that your skin lesion was not completely removed, or needs further wider excision due to the nature of the lesion previously removed, you may be asked to come back to the hospital for a further operation. This means taking away a further small amount of skin around the initial scar. This can be up to a centimetre either side of the original scar.

Feedback

We want your visit to be as comfortable as possible. Please talk to the person in charge if you have any concerns. If the ward/department staff are unable to resolve your concern, please ask for our Patient Advice and Liaison (PALS) information. Please be assured that raising a concern will not impact on your care. **Before you leave the hospital you will be asked to complete a Friends and Family Test feedback card.** Providing your feedback is vital in helping to transform NHS services and to support patient choice.

Trust Values

- Courtesy and respect
 - A welcoming and positive attitude
 - Polite, friendly and interested in people
 - Value and respect people as individualsSo people feel **welcome**
- Attentively kind and helpful
 - Look out for dignity, privacy & humanity
 - Attentive, responsive & take time to help
 - Visible presence of staff to provide careSo people feel **cared for**

- Responsive communication
 - Listen to people & answer their questions
 - Keep people clearly informed
 - Involve peopleSo people feel **in control**
- Effective and professional
 - Safe, knowledgeable and reassuring
 - Effective care / services from joined up teams
 - Organised and timely, looking to improveSo people feel **safe**



The hospital can arrange for an interpreter or person to sign to assist you in communicating effectively with staff during your stay. Please let us know.

For a large print version of this leaflet, contact PALS 01493 453240