

WOUND CARE INSTRUCTIONS – CLOSURE WITH ABSORBABLE SUTURES

We have used dissolving sutures/stitches to close your wound. A return suture removal appointment will not be necessary.

SUPPLIES:

- 1. Tap water
- 2. Q-tips

3. $\frac{1}{2}$ inch or 1 inch paper tape

WOUND CARE:

- 4. Non-stick dressing pads (i.e. Telfa)
- 5. Petrolatum (i.e. Vaseline), Aquaphor or Polysporin

The dressing you have been sent home with is called a pressure dressing. It should remain in place for 24 hours.

You may shower but do not let the forceful stream of the shower hit the wound directly.

After 24 hours, remove the pressure dressing. There will be a flesh/tan colored piece of tape that is directly over the stitches. Please try to keep the tape on for 5-7 days. As long as the tape remains in place, simply apply a thin layer of Vaseline, Aquaphor or Polysporin along the incision line and cover with a telfa and tape. Do this 2 times a day.

If the tape comes off before seven days, perform wound care as follows:

- The suture line should be cleansed daily with tap water. You may gently loosen any crusts with a wet Q-tip and pat dry.

-After cleansing the wound, apply a thin layer of Vaseline, Aquaphor or Polysporin over the stitches.

-Cover the wound with a non-stick dressing cut to the necessary size. Tape the dressing in place with paper tape.

One week after your surgery date remove the flesh colored tape that is directly over the sutures. Most/many of the beige colored dissolving sutures will pull out when the tape is removed. You should take a Q-tip moistened with tap water and cleanse the suture line. Any remaining sutures should fall out in the next several days. No further wound care is necessary at this point.

Please, no smoking, vaping or nicotine products during your Moh's procedure or the healing process. This causes blood vessels to constrict, impairing the healing process. Continue to take all other prescribed medication. You may restart your other supplements in 24 hours.

BLEEDING:

Careful attention has been given to your wound to prevent bleeding. You may notice a small amount of blood on the edges of the dressing the first day and this is normal. If bleeding is persistent and saturates the dressing, apply firm, steady pressure over the dressing with gauze for 20 minutes. If bleeding continues, repeat pressure for an additional 20 minutes. If bleeding persists, call the doctor or go to the nearest Emergency Room while continuing to hold pressure on the wound. Marked swelling at the surgical site may indicate blood accumulation and the doctor should be notified.

PAIN:

Post-operative pain is usually minimal. Tylenol or Ibuprofen as directed, usually relieves any pain you may have. If needed, apply an ice pack (or frozen bag of vegetables) over the dressing for 10-20 minutes every 1-2 hours for the first 24 hrs. This will relieve swelling, help minimize bruising and also lessen pain.

APPEARANCE:

There may be swelling and bruising around the wound, but will gradually soften and return to normal appearance over time. The suture line may appear bright pink to purple and the edges of the wound may be reddened. Slight tenderness to touch is normal. If the wound develops increasing pain, redness, heat, swelling or pus-like drainage, call the office. Those are signs of infection.

If there are any questions please call either office or after hours, call Dr. Christopher Weyer on his cell (520)977-4747 or Dr. Jamie Moenster on her cell at (520)427-4202.

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