

Department of Dermatology

Before Skin Surgical Procedure Advice to Patients



**Queen Margaret Hospital, Dunfermline
Victoria Hospital, Kirkcaldy**

**01383 627015
01592 648180**

A skin biopsy is a routine investigation that helps us to diagnose skin conditions. It can also be used as a treatment to remove some abnormalities, such as skin growths. A small piece of skin is removed under local anaesthetic in order for it to be looked at under the microscope.

Both before and after surgery you can eat and drink normally. Most procedures take about 30 minutes, but some can take up to an hour. You will be free to go home as soon as the procedure is finished. Particularly if the operation is on your hands, feet or near your eyes, it may be advisable not to drive yourself home. You should remove jewellery at the site of surgery and nail polish if the surgery is on the hand. Please remove make-up if your face is going to be treated.

You will be awake during the procedure. For virtually all types of operation you will be given a local anaesthetic. This is an injection into the skin next to the place that is to be treated. The injection will sting for a moment, but after a few seconds, the area will be numb, and the rest of the operation should be painless, although you should still feel touch and pressure.

Excision / Incision Biopsy

A piece of skin is removed and sutures (stitches) are used to close the skin. These will usually need to be removed in a week or two. Please tell the doctor before the operation if this will be difficult, for example if you will be away on holiday in the next two weeks. Occasionally the wound will not be closed completely, and left to heal by itself (secondary intention healing). You will be given careful instructions on how to manage the wound.

Shave Excision / Curettage

The surface of the skin is removed in this procedure and the area may be treated with cautery to stop any bleeding. The area will heal within a couple of weeks.

Medication

You can usually take all regular medication, but please tell the doctor if you are taking any anticoagulants (blood thinning tablets) such as aspirin, clopidogrel, warfarin, edoxaban or rivaroxaban. These do not usually need to be stopped but we do need to know if you take them. If you are on warfarin, you will need to have an INR check 3-5 days before the operation, and for the doctor to know the result of this test. If the result is greater than 3.5 then you may not be able to have the operation due to the risk of bleeding. If the result is between 3 and 3.5 your operation may go ahead, but this will depend on what type of operation you are having.

Allergies

Please tell the doctor if you have any allergies to medicines, dressings, latex or chemicals in synthetic rubber gloves.

Pregnancy

Local anaesthetic can be safely used in pregnancy. However we would usually recommend avoiding non-urgent skin surgery during the first 12 weeks of pregnancy.

Indwelling Devices such as Cochlear Implants, Pacemakers & Defibrillators

Please tell the doctor if you have an indwelling device. Diathermy cautery can safely be undertaken as long as it is more than 2cm from a cochlear implant. Pacemakers may affect the equipment we can use but will not prevent your surgery. If you have a defibrillator you may need to have your surgery performed with heart monitoring.

Problems that can occur with skin surgery:

Bleeding

If there is bleeding from the wound, sit up or raise the affected area and apply firm continuous pressure with a clean tissue or swab for ten minutes. If bleeding persists you should contact the Hospital on the number above or go to your local Accident and Emergency Department.

Bruising

This may occur especially if surgery is performed around the eyes. It will usually disappear over seven to ten days and will not leave any permanent mark.

Infection

If the wound becomes red, painful or hot, with weeping or oozing, it may be infected. You should contact your own General Practitioner or the Hospital as you may require antibiotics.

Wound Breakdown

This is very uncommon. It is most likely to occur just after the stitches have been removed or if the wound has become infected. If this occurs, you should contact the Hospital or your own General Practitioner.

Scarring

It is impossible to carry out skin surgery without leaving a scar. Every effort will be made to ensure that your surgery causes as little scarring as possible. However there is always a possibility of more noticeable scarring. As a general rule the length of the scar will be 3-4 times the length of the lesion removed. Certain areas of the body are more likely to develop scarring. This is particularly following operations on the upper chest or back, the shoulders and the upper arms, where the scars can be broad and lumpy. If you have previously noticed lumps arising in scars (keloid), or if members of your family have a tendency to this, you should be especially aware of this risk. A wide stretched scar can occur if it overlies a large muscle or joint. It can take up to 2 years before the final appearance of your scar becomes apparent.

Nerve Damage

When the skin is cut, small nerves will be divided. This may result in an area of numbness around the wound. Although recovery is usual, a permanent area of numbness may persist. It is extremely rare to cause damage to nerves that deal with movement. However there are certain areas, especially on the face, where deep surgery could cause damage to such nerves.

After care

Following the procedure you will be given an aftercare advice sheet. Usually it is advisable to keep the wound dry and covered with a dressing for 48 hours. Pain relief of two Paracetamol up to four times a day is recommended, if required. Avoidance of smoking will improve healing. Avoid swimming, heavy lifting and sports while your stitches are in, and also for a few weeks after suture removal as the skin surrounding your wound site will take 6 to 8 weeks to regain its strength again.