Second Intention Wound Care Instructions (Wound Healing on its Own)

These instructions will describe how to care for your surgical site that will heal on its own. Follow these instructions carefully for optimal cosmetic results. Keeping the area moist and covered without time open to the air or to “breathe” is very important. We do not want a scab to form, or the ointment to build up. This actually delays healing, while also increasing discomfort and scar formation.

MATERIALS NEEDED
- Mild (liquid) anti-bacterial soap (Softsoap, Dial, etc)
- Cotton tip applicators or Q-tips
- Scissors
- Tape (Hypafix is the brand we use and recommend)
- Ointment - Vaseline, A&D, or Polysporin (Do not use Neosporin)
- Non-stick dressing pads (to cover wound)
- Gauze pads (only to place over non-stick pad for absorbency)

PROCEDURE:
1. Keep the area dry on the day of surgery. You may get the bandage wet during your shower on the following day, unless otherwise informed by your nurse. The bandage will decrease the risk of bleeding due to the strong spray of the shower hitting directly on its surface.
2. Immediately following your shower, remove the wet bandage. Using Q-tips and a mild soapy water solution, cleanse inside and around the wound well, being certain to completely remove all old drainage/ointment. **Area should appear moist and red for optimal healing.**
3. Rinse and gently dry the wound with a clean Q-tip/gauze pad.
4. Spread a layer of ointment over the wound with a clean Q-tip.
5. Cut non-stick dressing pad to completely cover the wound and secure with tape. **Bandage should be airtight at all times. Apply additional tape as needed.** If the non-stick dressing sticks to the wound when you remove it, then use more ointment to prevent further sticking. If excessive drainage occurs, place an additional layer of gauze over the non-stick pad before securing with tape.

IMPORTANT NOTES:
1. DO NOT clean area with peroxide.
2. Change the dressing once daily until the wound is completely healed (some wounds may require 6-8 weeks for complete healing). In the case of excessive drainage, or difficulty with completely sealing the area, dressing may need to be changed more often.
3. Avoiding/decreasing tobacco use following surgery will drastically improve healing.
4. Avoid aspirin and other blood thinners for one week after surgery, unless these are prescribed by a physician. Alcohol also thins the blood.
5. If the surgical site is immediately on or next to the eye, then Dacriose solution may be used on an applicator to clean the corner of the eye and eyelids. This is a special cleansing solution for the eye. You can find it at your local pharmacy. You may also be given instructions to use a specific ointment.
6. Once the wound has completely healed over, begin using sunscreen to prevent darkening of the scar.

WHAT TO EXPECT:
1. After your surgery you can expect some discomfort from the surgical site. This is highly variable among patients and is also dependent upon the location of your surgery. Some areas are more sensitive than others. We recommend taking a dose of *both* Tylenol 1000mg and ibuprofen 400mg (at the same time) shortly after surgery, and every 6 hours as needed for pain. If your pain is not adequately relieved, or if you are having severe pain then you should call our office immediately or Dr. Viehman after hours. Avoid any aspirin containing products. **CAUTION:** Bufferin, Anacin, Goody Powders, Excedrin and B.C. Powders all contain aspirin products.
2. After surgery you should expect some mild swelling and redness around the surgical site. In many cases the swelling is a side effect of the numbing medication used during surgery. Some areas of the body tend to swell more than others (around the eyes and on the forehead.) Swelling may worsen over the 48 hours following surgery, particularly following lying flat at night. If you feel your swelling or redness is abnormal please call our office.
3. A low grade fever (99-101) for which any NON-ASPIRIN product may be used. Tylenol is recommended.
4. Mild drainage from the wound may have a foul odor and be yellowish in color. This is especially common on the legs. The yellow drainage is NOT a sign of infection.
5. Significant bleeding is unlikely but can occur. If you experience bleeding then lie down and apply firm, constant pressure to the surgical site for a minimum of twenty minutes. Do not “peek” during this period. If bleeding continues, repeat the pressure on the surgical wound for an additional twenty minutes. If the bleeding persists then please contact our office as early as possible during the day so that we may make arrangements for your evaluation. Dr. Viehman or his PA may also be reached after hours on their cell numbers. If you are unable to reach our office or Dr. Viehman, then please proceed to the nearest emergency room for evaluation and assistance. Call 911 for severe problems.
6. Ice packs may be placed over the wound dressing to help with pain and swelling, and bleeding. The ice pack is placed over the wound for fifteen minutes and may be repeated four times per day. You may also use a bag of frozen peas in substitution.
7. Please contact this office or your local doctor if you have excessive bleeding, swelling, redness, fever or pain.

Phone: 910-256-2100
Fax: 910-256-7999
Further questions can be addressed through our office at 910-256-2100. Our normal business hours are Monday, Tuesday and Thursday from 7:30am – 5:00pm and 7:30am – 1:00pm on Wednesday and Friday.