

Patient Information

Wound care advice following skin surgery (ENT)

Introduction

You have been given this leaflet following your skin surgery. The advice in this leaflet will help to make sure that any possible problems with your wound are minimised.

If you have any questions or concerns after discharge from hospital, please contact the ENT Outpatient Nurses between 8:00am and 5:00pm (the number is at the end of this leaflet). Out of normal working hours, contact NHS 111 for advice.

In an emergency, please go straight to the nearest Emergency Department.

Wound care advice

- Keep your wound dry for 7 days after the surgery.
- Avoid touching the wound as this could cause infection.
- You will receive separate advice about changing or removing your dressing from the doctor treating you. If you have not received wound dressing advice before leaving the ward, please ask a member of the team caring for you.
- If you have had a skin graft during surgery, you may notice some colour changes to the graft; this is normal. The skin graft will be reviewed by your doctor during your follow-up appointment.
- You may be asked to use an antibiotic cream, ointment or dressing after the surgery. The doctor or nurse will advise you about this.
- If you are currently taking any blood thinning medication, it may take longer for the bleeding to stop. If the wound bleeds after you have left the hospital, press on it with a clean tissue for 10 minutes.
- Please note that healing may be delayed if you have diabetes or problems with your immune system.

Reference No. GHPI1911_06_25 Department ENT Review due

June 2028



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Pain relief

Most wounds are not painful but if you do have any discomfort, you can take pain relief such as paracetamol. Please follow the dosage instructions in the packet.

If you are unsure about which pain relief to take, contact your GP, local pharmacist or the ENT Outpatient Nurses for advice (the number is at the end of this leaflet).

When to seek further advice

- If your wound is bleeding a lot and does not appear to be stopping, please contact the ENT Outpatient Nurses between 8:00am and 5:00pm. Out of normal working hours, please visit your nearest Emergency Department, where you may be directed to the Minor Injuries Unit.
- If your wound becomes hot, swollen and/or sore, or begins to ooze, contact your GP for advice. You may have an infection which might require treatment with antibiotics.

Follow-up appointment

You will be given the date and time of your follow-up appointment before you leave the hospital. If you have not received this, please ask a member of the team caring for you.

Contact information

If you have any concerns, please contact the ENT Outpatient Nurses for advice. Out of hours, contact NHS 111.

In an emergency, please go to your nearest Emergency Department.

ENT Outpatient Nurses

Tel: 0300 422 8549 Tel: 0300 422 8541 Monday to Friday, 8:00am to 5:00pm

ENT Day Surgery Unit (Mayhill)

Tel: 0300 422 5390 Monday to Friday, 8:00am to 6:00pm



Patient Information

NHS 111 Tel: 111

Further information

For more information, visit the **Gloucestershire Hospitals ENT** webpage by using the QR code below or by typing the wording into your web browser.



www.gloshospitals.nhs.uk/ourservices/services-we-offer/ear-nose-throat/

Making a choice

Shared Decision Making

If you are asked to make a choice, you may have lots of questions that you want to ask. You may also want to talk over your options with your family or friends. It can help to write a list of the questions you want answered and take it to your appointment.

Ask 3 Questions

To begin with, try to make sure you get the answers to three key questions if you are asked to make a choice about your healthcare.

- 1. What are my options?
- 2. What are the pros and cons of each option for me?
- 3. How do I get support to help me make a decision that is right for me?

nission from the MAGIC Progra * Ask 3 Questions is based on Shepherd HL, et al. Three questions that patients can ask to improve the quality of info Patient Education and Counseiling, 2011;84: 379-85



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