

# Wide Local Excision of Malignant Melanoma or Other Skin Lesion

## *How to prepare and what to expect*

*This handout explains how to prepare for your surgery, what to expect, and how to plan for your recovery.*

### Why do I need this surgery?

You have a skin *lesion* (sore). Your doctor advises you to have a surgery called *wide local excision* to remove it. We will take tissue samples during this surgery. They will be tested in the lab by a *pathologist*, a doctor who specializes in diagnosing diseases.

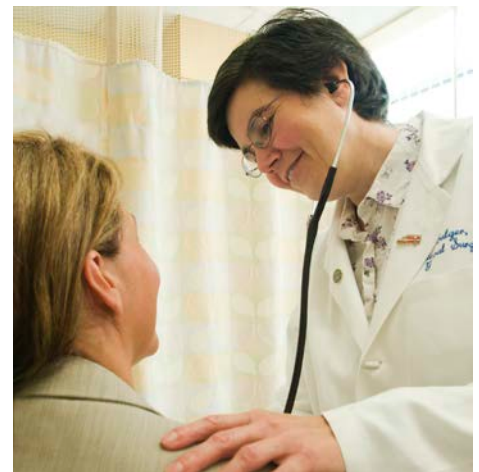
The amount of tissue we remove depends on:

- The size and thickness of your lesion
- Whether any lymph nodes will be removed

Some patients will also have *lymph node mapping with sentinel node biopsy*. Your doctor will talk with you about this before your surgery.

### How to Prepare

- Do **not** take any aspirin or other products that affect blood clotting for 1 week before your surgery. Two of these are ibuprofen (Advil, Motrin) and naproxen (Aleve, Naprosyn). See the attached sheet for more information.
- Do **not** shave any part of your body that you do not already shave every day. If you normally shave near your surgical site, do not shave that area for 2 days (48 hours) before your surgery.
- *If you are having lymph node mapping with sentinel node biopsy:* You received a prescription for **EMLA** or **LMX-4 cream**. You will apply this cream on the morning of your surgery. It will numb the area of your injection and make you more comfortable. **Buy this cream at least 2 days before your surgery.**



*Be sure to ask your doctor any questions you have about your surgery.*

## Day Before Surgery

- **Arrival time:** A nurse will call you by 5 p.m. the night before your surgery. If you are having surgery on a Monday, the nurse will call you the Friday before. If you do not hear from the nurse by 5 p.m., please call 206.598.6334.

The nurse will tell you when to come to the hospital and remind you:

- Not to eat or drink after a certain time
  - Which of your regular medicines to take or not take, and to sip **only** enough water to swallow your pills
  - To plan for someone to drive you home or to ride home with you in a taxi or bus
- **Shower:** Take a shower the night before your surgery:
    - Use the antibacterial soap your nurse gave you to wash your body.
    - Do **not** use the antibacterial soap on your face and hair. (See directions that came with the soap.) Use your own soap and shampoo on your face and hair.
    - Use clean towels to dry off, and put on clean clothes.

## Surgery Day

### At Home

- **Eating and drinking:** Follow the instructions the nurse gave you about when to stop eating and drinking.
- **Shower:** Take another shower with the antibacterial soap. Follow the same steps as you did the night before.
- **Medicines:** Follow the instructions the nurse gave you about which medicines to take or not take. Remember to sip **only** enough water to swallow your pills.
- *If you are having lymph node mapping, with sentinel node biopsy:*
  - Apply the EMLA or LMX-4 cream to your injection site **2 hours before** your lymph node mapping. Put the cream directly on your injection site and 1 inch in all directions beyond the site. Use a large amount, as if you were frosting a cake.
  - Cover the area with plastic wrap, such as Saran Wrap.

### At the Hospital

- **Heating blanket:** While you wait to go into the operating room, we will cover you with a heating blanket. Keeping your body warm helps reduce your risk of infection. Please ask for a heating blanket if you do not receive one.

## After Your Surgery

### For Your Safety

Medicine given during and after your surgery will affect you. For 24 hours after your surgery do **not**:

- Drive or travel alone
- Use machinery
- Drink alcohol
- Sign legal papers or make important decisions
- Be responsible for children, pets, or an adult who needs care

### Incision Care

Your doctor will talk with you about your incision and what kind of dressing (bandage) will be used. Your incision will be closed in one of 3 ways: with *sutures* (stitches), a *tissue flap* with stitches, or a *skin graft*.

#### ***If You Have Stitches or a Tissue Flap***

You will receive incision care instructions before you are discharged from the hospital.

- If your incision is closed with stitches:
  - A dressing (bandage) will cover your incision. You may remove this dressing 48 hours after your surgery and then shower.
  - If your stitches are **beneath the skin**, they will dissolve on their own.
  - If the stitches are **across your incision**, you will need to come to the clinic 1 to 2 weeks after your surgery to have the stitches removed.
- If you have a **tissue flap**:
  - The flap will be held in place with stitches.
  - You will need to visit the clinic 1 to 2 weeks after your surgery to have the stitches removed.

#### ***If You Have a Skin Graft and Dressing***

For a skin graft, some skin will be shaved off your thigh and placed where your lesion was removed.

- A thick “bolster” dressing will cover your skin graft for 1 week after your surgery. This dressing helps your body accept the skin graft. **Do not get this dressing wet.** We will remove the bolster dressing over your graft at your first follow-up clinic visit.
- You will also have a clear plastic dressing over the area where skin was taken for your graft. **Leave this dressing in place.** We will change it and replace it with another plastic dressing at your first follow-up visit.

- Red fluid will collect under the plastic. This is normal, and it helps speed healing. If the fluid leaks around the edges, you can add a clear plastic dressing or use gauze or a panty liner to absorb the fluid.
- After we remove the dressing over your graft:
  - You may shower, but do **not** let water directly hit your graft. Cover it with plastic wrap. Tape the edges to your skin to keep the area dry.
  - Use antibiotic ointment to keep the graft edges moist. Your doctor may advise you to cover your graft site with *petroleum gauze* (gauze that is saturated with petroleum jelly). Use the gauze for 1 to 2 weeks. Change it every day, or as often your doctor instructs.
  - Protect your graft site from the sun. Use sunscreen after it is healed.

## Pain Control

When you go home, use the pain medicine your doctor prescribed for you. It is important to take it before your pain is severe.

## Constipation

Avoid getting constipated. Please read the handout “Constipation After Your Operation.”

## Return to Work

Talk with your doctor about when you may return to work.

## Pathology Results

*Pathology results* are the findings from tests that are done on the tissue that was removed during your surgery. It will take at least 5 work days to get these results. Your provider will call you with these results, or will give them to you at your next office visit.

## Questions?

Your questions are important. Call your doctor or healthcare provider if you have questions or concerns.

Weekdays from 8 a.m. to 5 p.m., call the Center for Reconstructive Surgery at 206.598.1217. Press 8 when you hear the recording.

After hours and on weekends and holidays, call 206.598.6190 and ask to page the resident on call for your surgeon.

## When to Call

Call your doctor or nurse if you have:

- Bleeding or drainage that soaks your dressing
- A fever higher than 100.5°F (38°C)
- Shaking and chills
- Any sign of infection in your incision: redness, increasing pain, swelling, drainage that smells bad, or a change in the type or amount of drainage
- Nausea or vomiting, or both
- A growing fullness beneath your skin where your drain site was
- Concerns that cannot wait until your follow-up visit