Wide Local Excision of Malignant Melanoma or Other Lesion

What to expect and how to prepare

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

Your doctor recommends a surgery called wide local excision to remove your skin lesion. How much tissue is removed will depend on the size and thickness of your lesion and whether any lymph nodes will be removed. Your doctor will review all this information with you before 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 other brands) and naproxen (Aleve, Naprosyn, and other brands). See 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.

24 Hours Before Your Surgery

At Home

- Take 2 showers: Take 1 shower the night before and a 2nd shower the morning of 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 clothing.
• **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
  - To sip only enough water to swallow your pills
  - To plan for someone to drive you home or ride home with you in a taxi or bus

*If you are having lymph node mapping, with sentinel node biopsy:*

• You will be given a prescription for **EMLA or LMX-4 cream.** This cream will numb the area of your injection and make you more comfortable during the procedure.

• Apply the cream to your injection site 2 hours before your lymph node mapping. Use a large amount, as if you were frosting a cake. Put the cream directly on your injection site and 1 inch in all directions beyond the site. 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 to warm your body. This will reduce your risk of infection. Please ask for a heating blanket if you do not receive one.

**What to Expect After Your Operation**

**Precautions and Self-Care to Speed Your Recovery**

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

• Drive or travel alone
• Run machinery
• Drink alcohol
• Sign legal papers or make important decisions
• Be responsible for the care of another person
Incision Care
Before your surgery, your doctor will talk with you about how your incision will be closed and what kind of dressing (bandage) will be used. Your incision will be closed either with stitches, a skin graft, or a tissue flap.

If You Have an Incision 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, they will need to be removed in clinic 1 to 2 weeks after your surgery.
- If you have a **tissue flap**, it will be closed with stitches. These will need to be removed in clinic 1 to 2 weeks after your surgery.

If You Have a Skin Graft and Dressing
If your incision is closed with 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.**
- The bolster dressing over your graft will be removed when you come to clinic for your first follow-up visit.
- You will also have a clear plastic dressing over the area where skin was taken for your graft. Leave this dressing in place. It will be changed and replaced 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 it leaks around the edges, you can add a clear plastic dressing or place gauze or a panty liner to absorb the fluid.
- After the dressing over your graft is removed:
  - You may shower – but do **not** let water directly hit your graft. Cover it with kitchen plastic wrap and tape the edges to keep the area dry.
  - Keep the graft edges moist with antibiotic ointment. 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 and change it every day, or as your doctor instructs.
  - Protect your graft site from the sun. Use sunscreen after it has healed.
Pain Management
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.”

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

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

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
  - Bad-smelling drainage
  - A change in the type or amount of drainage
- Nausea or vomiting, or both
- An growing fullness beneath your skin where your drain site was
- Concerns that cannot wait until your follow-up 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, and press 8.

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