Surgical Instruction Sheet

PRE OPERATIVE INSTRUCTIONS:
• You may continue all medications not listed on the medication sheet. If you have any questions please contact one of our nurses.
• To help you choose the most convenient appointment time, please be aware that you will need to discontinue all activities such as golf, any form of exercise, and yard work until your sutures are removed.
• To ensure the best healing result, we request that you not return to work the day of and the day after your surgery unless otherwise instructed by Dr. Hollabaugh or Dr. Parry. The day of surgery should consist of going directly home, applying ice packs (see below) and rest. Dr.’s Hollabaugh and Parry also request that you do not leave town for at least 48 hours after your surgery.

IF YOU ARE HAVING MOHS SURGERY:
• Because your surgery is performed under local anesthetic, you may eat breakfast that morning.
• Most of our surgeries are performed in a minimum of three hours; however, please plan on being in our office the ENTIRE MORNING.

MATERIALS NEEDED:
1. Hydrogen Peroxide
2. Cotton tipped applicators – such as Q-tips
3. Antibiotic ointment - such as Polysporin or Bacitracin.  
   PLEASE DO NOT USE NEOSPORIN – this contains neomycin which may cause an allergic reaction even if they have used it before without any problems.
4. Non-stick pads- such as telfa, paper tape or any non irritating band aide that will fit over the incision site.

POST OPERATIVE INSTRUCTIONS:
Leave the pressure bandage in place for 48 hours. Following the 48 hours the bandage may be removed and begin the following steps twice daily:
1. Clean the wound twice daily with peroxide by using a rolling motion with the Q-tips and then apply a thin layer of ointment over the wound.
2. It is important to keep the wound clean. Dried blood and crusting should be removed to prevent irritation and infection. A layer of polysporin or bacitracin ointment must be kept over the sutures until they are removed. You may leave the incision site covered or uncovered during the day – it is your preference, however, we do recommend that a layer of the antibiotic ointment be kept over the sutures at all times. The incision site should be covered at bedtime or if you are outside in a “dusty or dirt” environment. It is also recommended that the site remain covered if the location of the incision is covered by clothing.
3. 48 hours after your surgery you may shower, however, use caution and do not let direct water contact the incision site. After showering, dry the area well and begin wound care as listed above. Do not submerge your suture site in the bathtub, hot tub, pool or lake; this will make your surgical site prone to infection.
4. If an oral antibiotic was prescribed please take it as directed until it is gone.

ADDITIONAL INFORMATION:
1. To help reduce swelling and discomfort after your surgery, ice packs need to be applied over the bandage for 15-20 minutes out of every hour until bedtime. (This is most important for the first 24 hours)
2. For pain management please take Extra Strength Tylenol 1-2 every 4 to 6 hours as needed. If pain medication was prescribed, please take as directed. Do not take any aspirin or ibuprofen products with in 48 hours after your surgery, as this could lead to bleeding.
3. Complications can include excessive bleeding, infection and pain. Some bleeding is normal with in the first 48 hours following surgery. If bleeding should occur, and soaks through your bandage, remain calm and apply steady, firm pressure for 20 minutes. If bleeding persists, contact our office. Signs of infections include: excessive redness, swelling, pain, yellow or green drainage and heat. If any of these symptoms occur, or if you have any questions, please call our direct nurse line at 972-378-0620 x 2109 during office hours.

NOTE: PLEASE DO NOT CHOOSE THE OPTION FOR A SPECIFIC NURSE FROM OUR PHONE PROMPTS. All calls should be directed to your doctor after 4:00.

Dr. Hollabaugh’s cellular phone: 972-814-6809       Dr. Parry’s cellular phone: 972-757-6312.

Return for suture removal in _____days. Your appt. is at ____________on ____________.