WOUND CARE INSTRUCTIONS – ABSORBABLE SUTURES

We have used dissolving sutures/stitches to close your wound. A return suture removal appointment will not be necessary.

**MATERIALS:**
1. Tap water
2. Q-tips
3. Petrolatum (i.e. Vaseline)
4. Bandaging material—if needed: Large Band-Aids, Telfa, Coban (Vet-wrap), gauze, tape, etc...

**WOUND CARE:**
The dressing you have been sent home with is called a pressure dressing. The pressure dressing should remain in place for 24 hours (or 48 hours as directed). The pressure dressing consists of several pieces of white gauze secured with white or flesh/tan colored tape.

☐ **Taped:** After 24(or 48) hours, remove the pressure dressing. There will be a flesh/tan colored piece of tape placed directly over the sutures. Please try to keep the tape on for 5-7 days. Keep the brown tape dry during this time. As long as the tape remains in place, no wound care or dressing is necessary. One week after your surgery date, remove the flesh colored tape that is directly over the sutures. Most/man of the beige colored dissolving sutures will pull out when the tape is removed. You should take a Q-tip moistened with tap water and cleanse the suture line. Any remaining sutures should fall out in the next several days. If the sutures do not fall out over that time, cut and remove them with tweezers or scissors. Sometimes, a light scrub with a washcloth will remove them. No further wound care is necessary at this point.

☐ **Non-Taped:** Perform wound care as follows. The suture line should be cleansed daily with tap water. You may gently loosen any crusts with a Q-tip and pat dry. After cleansing the wound, apply a thin layer of Vaseline over the sutures. Cover the wound with a non-stick dressing cut to the necessary size. Tape the dressing in place with paper tape. Seven to 14 days after your surgery, many of the beige colored dissolving sutures will start to crumble. You should take a Q-tip moistened with tap water and cleanse the suture line. Any remaining sutures should fall out in the next several days. If the sutures do not fall out over that time, cut and remove them with tweezers or scissors. Sometimes, a light scrub with a washcloth will remove them. No further wound care is necessary at this point.

**BLEEDING:**
Careful attention has been given to your wound to prevent bleeding. The initial dressing you have on is a pressure dressing to also help prevent bleeding.

You may notice a small amount of blood on the edges of the dressing the first day and this is normal. If bleeding is persistent and saturates the dressing, apply firm, steady pressure over the dressing with gauze for 20 minutes. If bleeding continues, repeat pressure for an additional 20 minutes. If bleeding persists, call the doctor or go to the nearest Emergency Room while continuing to hold pressure on the wound. Marked swelling at the surgical site may indicate blood accumulation and the doctor should be notified.

**CONTINUED ON BACK SIDE**
PAIN:
Post-operative pain is usually minimal. Plain Tylenol or Extra Strength Tylenol, two tablets every 4 hours, usually relieves any pain you may have. If needed, apply an ice pack (or frozen bag of vegetables) over the dressing the first 24 hours every 2-3 hours for 20 minutes. This will relieve swelling, help minimize bruising and also lessen pain.

APPEARANCE:
There may be swelling and bruising around the wound, especially if near the eyes. The area may feel firm and swollen (but will gradually soften and return to normal appearance over time). The suture line may appear bright pink to purple and the edges of the wound may be reddened. This will lighten day by day. Slight tenderness to touch is normal. If the wound develops increasing pain, redness, heat, swelling or pus-like drainage, call the office. Those are signs of infection.

As your surgical site heals, you may have occasional sharp brief pains. Itching is common but if severe and associated with a rash, call the office. Numbness may be present but slowly fades away over several months. Not uncommonly, the absorbable stitches under the skin may cause a one or more small, red pimples to appear along the incision line. In general this is an annoyance but will not interfere with final wound healing. If the stitch can be easily seen, it may be removed with a small clean scissors and tweezers.

Please avoid alcohol and over the counter blood thinners for 48 hours following surgery. Continue all medicines prescribed by your other physicians.

NOTES:
1. If the wound site is near the eye, saline eyewash may be used on a Q-tip to clean the corner of the eye and eyelids.
2. Make sure you clean your scissor with alcohol before each dressing change.
3. You may have a low-grade fever (99-100°F) for which Tylenol may be used.
4. You may have some clear drainage from the wound. This will stop after a few days. If not, please call the office.

IF THERE ARE ANY QUESTIONS, PLEASE CALL OUR OFFICE @ (406) 587-4432 ON WEEKENDS OR EVENING HOURS CALL YOUR PHYSICIAN AT HOME:

DR. AARON BRUCE (Cell): (727)804-8922