



# Patient Instructions after Surgery: Caring for your incision and dressings

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## Dressings

You will have a dressing placed over the surgical site in the operating room. This original dressing should stay in place for the first 48 hours.

The type of dressing used will vary by the type of surgery, the location of the incision and the surgeon who did the surgery. Different surgeons use different dressings.

Most patients will have an outer gauze dressing placed over the surgical site. In addition to this, some will have an inner dressing made up of "steri-strips". These are white strips made of a strong tape that has long strings in it to make it sturdy. The steri-strips usually stay in place for about 2 weeks. They may loosen during this time and may fall off early in some cases. Other surgical sites will be covered with a glue substance that will look dry and flaky. This will eventually wear off.

The outer dressing is usually made up of either a layer of gauze or a clear plastic film covering called Tegaderm<sup>®</sup>. Sometimes one or both of these are used over the steri-strips.

Removing the dressing over a surgical site and looking at the incision for the first time can be stressful. Please discuss your concerns with your nurse, surgeon or social worker, and make them aware of your feelings. If you are admitted to the hospital, the original dressing will be removed before you leave and a nurse will assist you. If you are at home, it may be helpful to have a family member or close friend with you to help with the first dressing change.

After 48 hours remove the outer dressing, but leave the steri-strips over the incision. You may then shower (no baths or hot tubs). Avoid running water directly on the incision. Pat the incision area dry. After the first week you may wash your incision with soap and water.

## **General Tips:**

- Throw away old dressings in a plastic trash bag that is securely tied shut
- Remember to wash your hands before removing the old dressing
- Eat a well-balanced diet and avoiding smoking will help promote healing of your surgical site.
- We do not recommend the use of special lotions, antibiotic ointments or creams on the incision area. It's best to let it heal on its own.

## **Fluid Collections:**

Fluid collections that feel like a hard lump are normal under any incision. This is part of the body's way to heal, and is normal. It will usually go away on its own in one to two months. Please notify your doctor/nurse if the fluid collection continues to increase in size, becomes painful over the entire area or has a reddened area greater than 1 inch in size around the incision area.

## **Special Instructions about your dressing:**

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## **When to Call Your Doctor**

Contact your surgeon or nurse practitioner for any of the following reasons:

- Oral temperature of 101 degrees Fahrenheit or greater
- Persistent, severe or increasing pain
- Bleeding from the incision that is difficult to control with light pressure
- Persistent nausea or vomiting
- Fluid or drainage from the incision area or around the drain site (drainage through the tube is normal and expected)
- 1 inch of redness or more around the incision area
- Incision becomes warm or hot to the touch
- Foul odor from the incision area
- Swelling of the entire surgical area
- Leakage around your drainage tube and the gauze dressing is wet

- Any significant change that causes you concern

## How to Call Your Doctor

Contact the surgical nurses at 734-936-6000 during business hours (8am to 4pm; Monday-Friday).

**After 4:00 pm daily, weekends and holidays:** contact the UM page operator at: (734) 936-6267 and ask to have the On-call Surgical Oncology Resident paged.

This document is not intended to take the place of the care and attention of your personal physician or other professional medical services.  
Our aim is to promote active participation in your care and treatment by providing information and education.  
Questions about individual health concerns or specific treatment options should be discussed with your physician.

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