**Dressing Materials & Instructions**

- Telfa® or non-adherent dressing pads
- 4 x 4 gauze or cotton pads (like those for removing make-up)
- Gloves (non-powdered, non-latex)
- Micropore paper tape or Band-aids
- Topical ointment such as Vaseline™ petrolatum, Aquaphor®
- Do not use Polysporin®, Neosporin®, or other antibiotic ointments.

Other materials: ____________________________________________

- Do not remove our pressure dressing for 24 hours after surgery.
- **Wounds heal best when kept covered and moist. Avoid crustiing or scabbing.** Keep your wound covered unless instructed otherwise.
- **Remember, STRESS the wound and it will stress YOU!**

1. For 24 hours; do not remove our pressure dressing unless soaked. Keep the wound dry.
2. After 24 hours; Wash your hands, wear gloves, and remove the dressing. If there is crustiing or scabbing, then get in the shower and soak it off. Do NOT forcefully rub the crust or your wound.
3. Gently wash the wound with clean water (tap water or saline) and pat dry with a clean gauze or cotton pad. Do not use hydrogen peroxide.
4. Apply an ointment (Vaseline™, Aquaphor®) on all suture lines using a clean, new Q-tip.
5. Cover the wound with Telfa® or nonstich gauze and secure with tape. Band-aids may also be used, but make sure the sticky part of the Band-aid does not touch the wound.
6. Repeat your dressing changes (steps 2 through 5) based on the amount of drainage. More drainage = more dressing changes. Leg wounds drain more than wounds on the chest or higher.
7. It is rare to have an infection unless your drainage is pus-like (thick yellow, smelly).
8. If your dressing was sewn on, then steps 2-5 are not needed. Keep the edges of the sewn on dressing moist with Vaseline™ petrolatum or Aquaphor® to prevent scabbing.

**Activities after Surgery**

- For 24 hours: 1) have someone with you if you took any medication to help you relax. 2) Do not get the dressings wet. You may shower after 24 hours. 3) Avoid alcohol.
- For one week after surgery, avoid any activity that pulls or stretches your wound, increases your heart rate, or rubs against your dressing (avoid sports, sex, vacuuming, bending below your waist, lifting more than 10 lbs).
- **Face Surgery:** do not bend your head below your waist. Elevate your head with 1 to 2 extra pillows when sleeping or lying down. **Arm or Leg Surgery:** raise the limb as much as possible above your waist when you are resting.

• Baths/Swimming/Hot Tub: avoid submerging the wound under water until it has sealed over.

When am I healed?
Remember that after your wound has sealed completely, there is still active healing underneath for many more months. Even when you no longer need a dressing, continue keeping a thin layer of Aquaphor® ointment on the wound for another 1-2 months. Firmness and healing sensations (mild itching, tingling, pulling) may still be felt 4-6 months later. Your scar will not be mature until 12 months or more after surgery. Patience, following wound care instructions, avoiding stress on the wound, and keeping your follow up appointments is all critical to optimize your results.

Swelling, Redness, Bruising and Drainage
It is normal to have some swelling, redness, and bruising - all of which will improve over time (days to weeks). A black eye is common if you had surgery around or above the eyes. Elevating the wound on extra pillows will reduce swelling. Applying a cold compress (bag of frozen peas) will also help reduce swelling. Once you get home, hold the ice pack against the dressing for about 10 minutes, several times an hour. You may continue this until bedtime and even the following day. Do not apply the cold compress directly on your skin.

There may be some clear wound drainage, which should stop after a few days. The drainage may be pinkish-yellow in color, which is normal. The drainage may last longer if your wound was not stitched closed completely.

What About Bleeding After Surgery?
Bleeding after surgery is uncommon but may be seen in the first 48 hours after surgery. If you have any bleeding, follow the instructions below.

1. Lie down, elevate the wound if possible, and apply continuous, firm pressure for at least 15 minutes. Do not stop applying pressure until 15 minutes have passed. Repeat up to 3 times.
2. If the bleeding has soaked your dressing, it should be removed and a new one placed.
3. If the bleeding has not stopped after three applications of 15 minute pressure, call our office. For after hours, call your physician at the number on page 1. We may ask you to return to the office to assess and care for your wound.
4. Do not go to the emergency room unless it is a true emergency. Most issues related to your surgery may be addressed in the office setting.

When Should I call the Office (Day Time: 832-663-6566. After Hours: 832-643-8592)
• Fever of 101° Fahrenheit or higher (38.3 ° Celsius)
• Bleeding not controlled by direct pressure
• Pain that increases each day or that is not relieved by over-the-counter medications
• Rapid or increasing swelling, heat, and pain around the wound
• Reopening of the wound at any time
• Increased or expanding redness and warmth around the wound, or pus drainage from the wound
Wound Care with Mother Nature

Healing on your own: Some wounds heal best without stitches (healing by Mother Nature or second intention). When wounds are open, please remember these points:

✓ **Stress the wound and it will stress you** (See activity restrictions below).
✓ **It takes time**: healing takes several weeks (3-8 wks depending on location and wound size).
   The face heals the fastest while the legs and feet take longest to heal.
✓ **Infection is rare in open wounds. Drainage is common**: especially the first 1-2 weeks after surgery. Oozing is clear and pink to yellow and is not an infection. Dressing changes may need to be more frequent (2-3 times daily) the first week and less so as drainage decreases.
✓ **Wounds heal best when covered and moist. Avoid crusting or scabbing**. Keep your wound covered unless instructed otherwise.

**Dressing Materials & Instructions**

- Telfa® or non-adherent dressing pads
- 4 x 4 gauze or cotton pads (like those for removing make-up)
- Gloves (non-powdered, non-latex)
- Micropore paper tape or Band-aids
- Topical ointment such as Vaseline™ petrolatum, Aquaphor®
- Do not use Polysporin®, Neosporin®, or other antibiotic ointments.

Other materials:

1. For 24 hours; do not remove our pressure dressing unless soaked. Keep the wound dry.
2. After 24 hours; Wash your hands, wear gloves, and remove the dressing. If there is crusting or scabbing, then get in the shower and soak it off. Do NOT forcefully rub the crust or your wound.
3. Gently wash the wound with clean water (tap water or saline) and pat dry with a clean Gauze or cotton pad. Do not use hydrogen peroxide.
4. Apply a generous amount of ointment (Vaseline™, Aquaphor®) on the wound
5. Cover the wound with Telfa® or nonstick gauze and secure with tape. Band-aids may also be used, but make sure the sticky part of the Band-aid does not touch the wound.
6. Repeat your dressing changes (steps 2 through 5) based on the amount of drainage. More drainage = more dressing changes. Leg wounds drain more than wounds on the chest or higher.
7. As long as your drainage is not pus-like (thick yellow, sometimes smelly), then it is unlikely to be infected.
Activities after Surgery

- For 24 hours: 1) have someone with you if you took any medication to help you relax. 2) Do not get the dressings wet. You may shower after 24 hours. 3) Avoid alcohol.
- For one week after surgery, avoid any activity that pulls or stretches your wound, increases your heart rate, or rubs against your dressing (avoid sports, sex, vacuuming, bending below your waist, lifting more than 10 lbs).
- **Face Surgery**: do not bend your head below your waist. Elevate your head with 1 to 2 extra pillows when sleeping or lying down. **Arm or Leg Surgery**: raise the limb as much as possible above your waist when you are resting. **Lip Surgery**: eat soft foods. Keep your lip well lubricated with ointment (Vaseline™ petrolatum, Aquaphor®).
- **Baths/Swimming/Hot Tub**: avoid submerging the wound under water until it has sealed over.

What About Bleeding After Surgery?
The risk of bleeding is greatest in the first 48 hours after surgery. If you have any bleeding, follow these instructions;
1. Lie down, elevate the wound if possible, and apply **continuous, firm pressure** for at least 15 minutes. Do not stop applying pressure until 15 minutes have passed. Repeat up to 3 times.
2. If the bleeding has soaked your dressing, it should be removed and a new one placed.
3. If the bleeding has not stopped after three applications of 15 minute pressure, call our office at 832-663-6566. After hours, call Dr Nguyen at 832-643-8592.
4. Do not go to the emergency room unless it is an emergency. Most issues related to your surgery may be addressed in the office setting.

When Should I call the Office or Dr Nguyen?
Call us (phone numbers at bottom of page) if you have:
- Fever of 101° Fahrenheit or higher (38.3 ° Celsius)
- Bleeding not controlled by direct pressure
- Pain that increases each day or that is not relieved by over-the-counter medications
- Rapid or increasing swelling, heat, and pain around the wound
- Reopening of the wound at any time
- Increased or enlarging redness and warmth around the wound
- Pus drainage from the wound
Swelling, Redness, Bruising and Drainage

It is normal to have some swelling, redness, and bruising - all of which will improve over time (days to weeks). A black eye is common if you had surgery around or above the eyes. Elevating the wound on extra pillows will reduce swelling. Applying a cold pack (bag of frozen peas) will also help reduce swelling. Once you get home, hold the ice pack against the dressing for about 10 minutes, several times an hour. You may continue this until bedtime and even the following day. Do not apply the cold pack directly on your skin.

When am I healed?

The site is sealed if it no longer oozes and pink smooth skin has completely covered the wound. Even then, it is still healing underneath for many more months. Continue applying a thin layer of Aquaphor® ointment on the wound for 2 more months. Firmness and healing sensations (mild itching, tingling, pulling) may still be felt 4-6 months later. Your scar will not be mature until 12 months or more after surgery. Patience, following wound care instructions, avoiding stress on the wound, and keeping your follow up appointments is all critical to optimize your results.
LIQUID NITROGEN/CRYOTHERAPY WOUND CARE INSTRUCTIONS

Cryosurgery is a procedure in which skin is quickly frozen by applying a spray of liquid nitrogen to the area being treated. Liquid nitrogen is very cold.

Cryosurgery may be an alternative to regular surgery. It takes a few minutes and may be used to treat precancerous or noncancerous (benign) growths (warts, skin tags, large oil glands, etc.).

Procedure

Liquid nitrogen is applied directly on the skin as a spray or with a cotton-tipped applicator. Several applications may be needed to treat the area. You may feel a stinging or burning sensation during cryosurgery.

The area treated will become swollen, turn pink, then red, and may blister. As the skin peels, the treated lesion will peel off as well. Occasionally, several treatment sessions may be needed to treat your condition. A black eye is not uncommon if you had cryosurgery near or above the eyes.

Home Care Instructions

Wounds heal best when kept covered and moist. Avoid crusting or scabbing.

1. If the skin is opened, clean the area twice a day with clean water (clean tap water or normal saline) and apply an ointment (Vaseline™, petrolatum or Aquaphor®).
2. Do not use Polysporin®, Neosporin®, or Bacitracin® other antibiotic ointments.
3. Do not use hydrogen peroxide to clean the wound.
4. If a blister forms and causes pain, you may lance the blister with a sterilized needle (boil a sewing needle and let it cool before using) and use a clean gauze to express out the blister fluid. Do not remove the overlying skin.

The treated area will heal within several weeks. A scar that is whiter than the surrounding skin is typical after cryosurgery treatment.
Care after Blu-Light Treatment (PHOTODYNAMIC THERAPY (PDT))

1. AVOID direct sunlight/sun exposure 48 hours after your blue light treatment. Wear your beautiful wide brim hat and stay indoors as much as possible. Remember that sunlight can penetrate through car and home windows.

2. Burning and stinging can last up to 24 hours after your Blu-Light treatment. Ibuprofen taken as directed over-the-counter as well as ice packs is helpful for these symptoms.

3. For the first 7-10 days, treat your skin like a sunburn and moisturize 4-6 times daily with either Aquaphor ointment or Vaseline petrolatum (both over-the-counter).

4. Wash your skin with clean water, normal saline, or vinegar soaks (see below)

5. Do not allow any scabbing or crusting to develop. If you develop crusting, use vinegar soaks (1 teaspoon white vinegar plus 1 cup clean water) to gently remove the crusts or place a gauze over the crusting and allow warm shower water to gently remove. Do not forcibly pick off the scabs/crusts.

6. Redness and swelling may last up to 4 weeks after your Blu-Light treatment.

7. Sunscreen (UVA and UVB protection, SPF 30 or greater) and hats are recommended to maintain the benefit you have gained with the Blu-Light treatment.

8. Please call us (281-943-6640 8 AM to 5 PM Mon-Thurs and 8AM-2PM Friday) if you observe the following:
   a. fever greater than 101 Fahrenheit.
   b. burning stinging and or itching that increases after 24 hours
   c. pus, drainage or pustules
   d. blisters, especially if painful

Avoid scabbing, crusting like these two photos by moisturizing frequently (4-6x daily) with Aquaphor ointment or Vaseline petrolatum.
BIOPSY Wound Care: Stress the Wound and it Will Stress You.

Whether it is a lab test, a scan, or a biopsy- it is important that you know the results. If you have not heard from us regarding your test by 2 weeks, please call us. We will return your call within 24 hours. Do NOT assume that no news is good news. To Reach Us: 832-663-6566

INSTRUCTIONS AFTER YOUR BIOPSY

Bleeding: this is uncommon but should it occur, elevate the area and apply firm, continuous pressure to the site for at least 15 minutes. If bleeding continues, apply fresh gauze as needed and re-apply pressure for another 15 minutes. If the bleeding has not stopped after 3 applications of continuous pressure, call us immediately (numbers below). If it is an emergency, go to your nearest Emergency Room and also call your physician (numbers below).

WOUND CARE (Avoid crusting/scabbing, wounds heal best when kept moist and covered)

Materials Needed:

- non-stick gauze (Telfa®),
- 4 x 4 gauze,
- paper tape or Band-aids,
- Ointment (Use either Aquaphor® or Vaseline petrolatum® (Do NOT use Polysporin®, Neosporin®, or Bacitracin®).

1. 24 hrs after your biopsy: Wash your hands, wear gloves, and remove our dressing (or sooner if it becomes wet/soiled).
2. Soak a 4 x 4 gauze (or clean cotton pad) in clean water and gently dab to clean the wound. If crusts/scabs have formed, then gently remove them with wet soaks or gentle shower spray for 15 minutes Do NOT scrub, or rub, or use hydrogen peroxide or alcohol.
3. After cleaning, apply ointment on the wound. Cut the nonstick gauze to fit and secure over the wound with paper tape. Band-aids may also be used if it fits the biopsy site.
4. Repeat steps 2 & 3 once daily until your wound heals (2-3 weeks) or until stitches are removed.
5. If stitches were placed, then return to our clinic for their removal in ________ days.
6. Call us if you have uncontrolled bleeding, pus or smelly discharge, fever 101° F (38.3° Celsius) or higher, increasing pain, enlarging redness & warmth around the wound, or any other concerns. To reach us: 832-663-6566.