

Surgical Procedures in Dermatology

Patient and Parent Information



477 N. El Camino Real
Suite C204
Encinitas, CA 92024
Phone: 760.634.3376
www.comprhensivederm.com

What to expect on the day of surgery?

All children are a little nervous on the day of the procedure irrespective of their age, and most are afraid of needles. This is normal but there are some things that may help to reduce anxiety:

We encourage you to let your child bring a favorite soft toy and a CD, a book or a GameBoy for distraction and entertainment. Our office offers GameBoys and favorite Children's titles on DVD for our patients.

It helps to talk at home about the procedure ahead of time so the child has a better idea of what to expect.

We try to take your child step by step through the procedure in a friendly relaxed atmosphere.

-The procedure will be done in a special room with an adjustable table that can be moved up and down ("Disney table").

- A special bright light is switched on.

- Several people will be in the room. You can stay during the procedure seated next to your child.



-The nurses and doctors wear funny gloves (purple) and sometimes masks (almost like at Halloween).

-The surgical area will be cleaned with special "soaps" (pink "Barbie" soap) and draped with green cloths.

AFTER THE SURGERY: the wound will be covered with a wound dressing. This protects the wound from infection and applies extra pressure to prevent bleeding. It is also sometimes helpful in restricting unwanted movement and stopping children from touching the wound area.

We encourage you to leave this wound cover on for 24 hours before changing it !



These steri strips are applied to the wound after surgery to give the wound extra strength.

Often we also apply **steri-strips** to the wound for extra protection against spreading of the wound edges. These paper strips will fall off at dressing change, which is normal.

On the day of suture removal we sometimes reapply these strips to provide extra strength to the wound for several more days.

The spot where the knot of the suture was pressing against the skin may show a small depression and minor redness for a few days after suture removal. This is normal and will resolve.

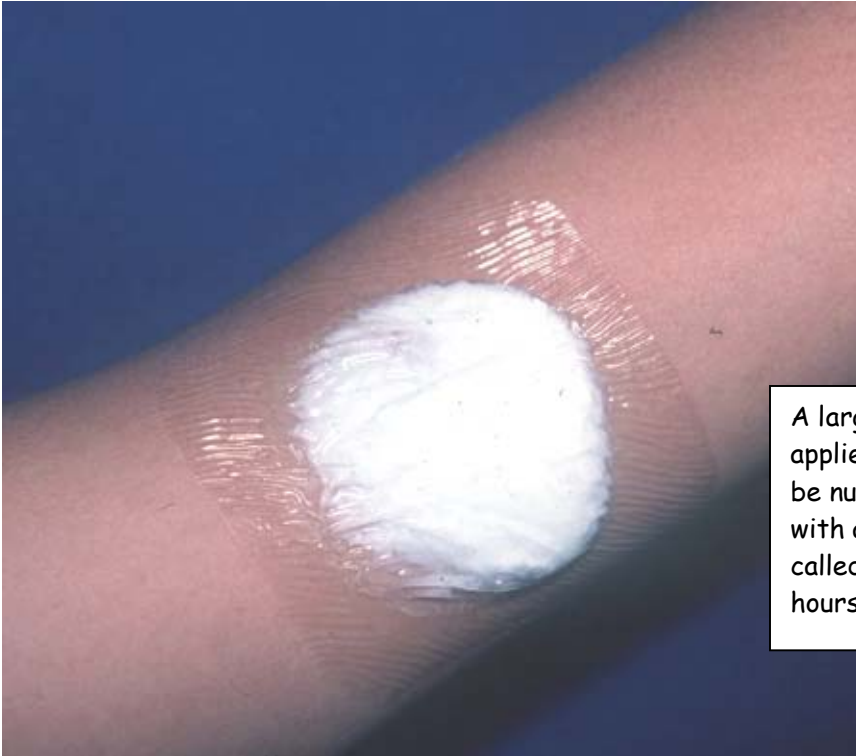
Pain Relief

Our aim is to make the surgery as painless as possible, so that your child has an overall positive experience!

Emla and Ela-Max are numbing creams that can help with the discomfort of the initial injection of the local anesthetic agent. They do not substitute for the local anesthetic! Either cream should be generously applied under an airtight dressing (usually something called Tegaderm) about 90 minutes before the procedure. This can be done at home.

Where do I get the cream?

Elamax 4% cream is available at local pharmacies without a prescription. We also sell tubes out of our office at a reduced price. Wherever you buy it, don't forget to buy the Tegaderm airtight dressing to hold the cream in place.



A large glob of cream is applied to the area that is to be numbed. It is covered with an airtight dressing called Tegaderm about 2 hours before the surgery.

Some procedures require **GENERAL ANESTHESIA**, particularly in very young children who are not expected to tolerate the surgery awake. This type of anesthesia is given in the Day Surgery Center at Children's Hospital. Children arrive at their appointed time and can usually go home several hours after the surgery on the same day. The anesthesiologists at Children's Hospital are specially trained and use child friendly "flavors" via a breathing mask to induce anesthesia. Again you are encouraged to let your child bring a favorite soft toy or blanket.



The surgery

Most lesions can be removed in one session and the wound is closed with stitches. In order to give the wound extra strength, two layers of sutures will generally be placed:

- The first, **deep layer** is done with dissolvable stitches that the body will slowly absorb.
- The second, **superficial layer** is done with stitches that will have to be removed between 7 and 14 days after the surgery.
- Occasionally a wound can be closed using special skin glue called "**Dermabond**". It is sort of like "crazy glue" for the skin. The wound closed with Dermabond may get wet but not be immersed under water. It also avoids having to come back to the doctor's office to get stitches removed. This glue dissolves on its own in about 10 days.

Do not use ointments or creams on the wound if dermabond is used; they will dissolve the skin glue!

Here are some hints regarding care of the **SURGICAL SKIN WOUND:**

- Often a wound will look bruised for several days after the surgery, and you may notice some mild blood tinged discharge. **This is normal!**

-Mild soreness at the site of surgery postoperatively is also normal and may be relieved by giving your child Tylenol.

-Normal wound care at home requires for the wound to be cleaned with hydrogen peroxide twice daily. Antibiotic ointment should then be applied to the wound, and the area should be covered with a clean wound dressing.

Try to keep the wound area clean and dry at all times!

The day after the surgery you may want to shower covering the wound with a waterproof wound dressing (ie. Tegaderm), but **do not immerse the wound in water!**

Should you notice swelling, redness, yellow pus, significant pain or should your child develop a fever, we would like you to contact us, since these may be signs of a wound infection! Your child may require an oral antibiotic.



This is a pigmented birthmark on the side of the temple.

The lesion was surgically removed in one session under local anesthesia and the wound was closed using deep and superficial sutures.



This is the same patient several weeks after the surgery and removal of the superficial sutures.

The appearance of the scar will continue to improve and blend in over several months.

It is important to protect new scars from sun exposure, as they will otherwise appear darker than the surrounding skin.



This is a pigmented lesion on the shoulder before and immediately after the surgery. The blue thread is the suture running from one end of the wound to the other. This type of suture is usually removed after 2-3 weeks. One stitch was placed in the middle for extra strength, and can be removed after 5 days. **To achieve a good result the child needs to restrict physical activities until suture removal, so that the wound does not spread! This is important to remember when scheduling for the surgery!**



Example of a "staged" procedure:



This is a large pigmented mole on the chin. Surgical removal and primary closure in one session is not possible. The decision for removal in several sessions (stages) is made.



This is the same mole after the first surgery. The skin has completely healed and the scar from the first surgery is running within the center of the mole.

In the second surgery the rest of the mole including the first scar is being removed.



This is the final result after two surgeries.

A scar will remain but is less apparent than the mole.



This is a large Keloid behind the ear.



Examples of wound closure techniques:



This is a running "subcuticular" suture. The thread is lying underneath the skin and only the knots on either side are visible. This type of suture does not leave any "hatchmarks" and can be left in place for up to 3 weeks to achieve complete wound healing.



Here the wound was being closed using "Dermabond", a special type of skin glue. No sutures are necessary! This type of wound closure may only be used in wounds with minimal tension. **Do not use ointments on this wound, as this will dissolve the glue!**

Example of a "Keloid" scar:



This scar is thickened and "bumpy".

The risk to develop such a scar is high in certain areas of the body like the chest!

The risk also depends on personal constitution and family history. It is higher in African-American, Asian and Latino patients.



There are different treatment options available to improve the cosmetic appearance of a scar.

This is an example of "Cica care", a silicon scar pad that is worn on the skin for 24 hrs over several months.

It will help flatten and soften a keloid scar.

Laser and cortisone injections may also be recommended for this undesirable type of scarring.