

MAINTENANCE FREE DRESSING INSTRUCTIONS

A maintenance free dressing consists of three major components: 1) Duoderm – this is a brown, spongy adhesive foam that is cut to size and applied directly over the incision line; 2) Opsite – this is a clear sticky adhesive that resembles saran wrap and it is placed over and around the Duoderm; and 3) Pressure bandage – this consists of a ball of fluffy white gauze taped to the skin.

1. Leave the white pressure bandage on for 24 hours unless told otherwise. It is permissible to shower during this period as long as the bandage does not get wet.
2. After 24 hours, remove the white pressure bandage only. **Leave the Duoderm and Opsite dressing in place.** It is water-resistant so you can get it wet in the shower; however, we would not recommend soaking this dressing. The dressing can be left on for 6 more days and it is maintenance free so once the white pressure bandage is removed, nothing further needs to be done.
3. Approximately 7 days from the time of surgery, the Duoderm and Opsite dressing should be removed. You can start by peeling off the Opsite first, followed by the Duoderm. The Duoderm may be quite adherent to the incision line; however, do not be afraid to pull on it firmly to remove it. You may notice stray sutures in incision line and this is normal. These sutures will absorb on their own.
4. Use a cotton tipped applicator (i.e. Q-tip) soaked in hydrogen peroxide to clean around the incision line but *NOT directly on the incision line*. Any loose material following this cleaning should be removed.
5. Following cleaning around the wound with hydrogen peroxide, apply a large, thick layer of Vaseline over the entire incision line. Use a generous amount of Vaseline - similar to frosting a cake.
6. After the Vaseline has been applied, cover the entire incision line with a non-stick dressing, gauze, or a bandage/bandaid and make sure it is secure.
7. The bandage can be changed once a day and should be continued for one week. With each bandage change, repeat steps 3 through 5. Also, it is permissible at this point to allow the incision line to be uncovered while in the shower. You can gently allow soap and water to run over the incision line daily.

***** The most important aspect of wound healing is to make absolutely sure that the incision line is moist with Vaseline at all times. Keeping the wound covered also helps maintain the moisture provided by the Vaseline.** Wounds that dry out heal much more slowly and less nicely.

Pain: Extra strength Tylenol 500 mg (acetaminophen) can be taken for pain if needed. Follow the directions on the bottle for dosing. **DO NOT** take any medications with aspirin, aspirin products, ibuprofen (i.e. Motrin, Advil) arthritis medications or related medications without first talking to our office as these medications can thin your blood and increase your risk for bleeding.

Bleeding: True bleeding is rare and should be differentiated from dried blood on the bandage. Dried blood on the dressing is normal and not a cause for concern. Bleeding is defined by active oozing from the wound. If it occurs, apply firm pressure to the site of oozing for **20 minutes**, timed by looking at a clock. You are not to discontinue pressure to see if the bleeding has stopped until 20 minutes have elapsed. If the bleeding continues, remove the pad and press directly with a clean gauze pad or tissue over the bleeding site for another 20 minutes and reassess. If bleeding continues, call our office or go to your local emergency room.

Swelling: Swelling and redness in and around the site of surgery is normal and expected. Swelling also commonly involves the eyes when surgery is done on the forehead, nose, cheeks, and other areas on the face. The swelling typically starts a day or two after surgery and can get worse before it gets better. Extra strength Tylenol around the clock, ice to the swollen areas, and keeping the head elevated during the day and at night, can help speed the resolution of the swelling. The swelling will eventually resolve over 1-3 weeks. ***** For true emergencies, please call our office to speak to a physician immediately.**