

SECOND INTENTION HEALING DRESSING INSTRUCTIONS

1. Leave the white pressure dressing on for 48 hours unless told otherwise. It is permissible to shower during this period as long as the bandage does not get wet.
2. After 48 hours, remove the pressure dressing. If a white, fluffy cotton-like material called Sorbsan was applied to the wound at the time of surgery, it can also be removed at this time. Do not be surprised if there is dried blood on the dressing and if the Sorbsan is blood soaked – **this is normal and expected**. There should not be active oozing of blood from the wound. If there is, see the instructions for “Bleeding” below.
3. Use a cotton tipped applicator (i.e. Q-tip) soaked in hydrogen peroxide to clean around the wound but **NOT in the wound**. Any loose material following this cleaning should be removed. **NOTE: Never place a used cotton tip applicator stick back into the bottle of hydrogen peroxide as it will contaminate it.**
4. Following cleaning around the wound with hydrogen peroxide, apply a large, thick layer of Vaseline over the entire wound. Use a generous amount of Vaseline - similar to frosting a cake or spackling a hole in the wall.
5. After the Vaseline has been applied, cover the entire wound with a non-stick dressing, gauze, or a bandage/bandaid and make sure it is secure.
6. The bandage can be changed once or twice a day. With each bandage change, repeat steps 3 through 5. It will generally take 7-12 weeks for the wound to fully heal. At this point, approximately two days from the time of surgery, it is permissible to allow the wound to be uncovered while in the shower. You can very gently allow soap and water to run over the wound once a day.

***** The most important aspect of wound healing is to make absolutely sure that the wound 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 generally do not fill in as 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, ibuprofen (i.e. Motrin, Advil) arthritis medications or related medications without first consulting us 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. Do 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.