

Who would benefit from this procedure?

Minor surgery is performed for moles, cysts or scars. It may be purely cosmetic or medically necessary. The operation is usually performed in a theatre within the Out-patients Department

What happens before the surgery?

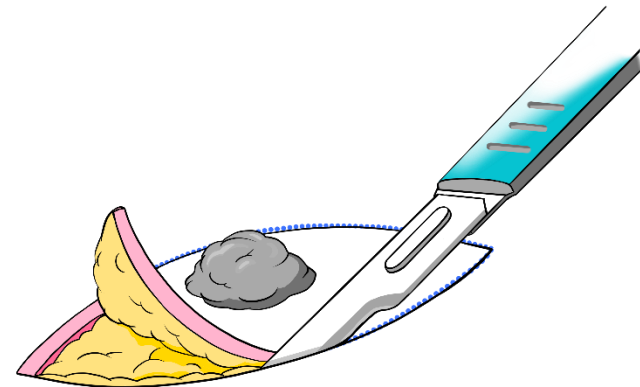
Mr Dheansa will fully assess you for suitability and any further procedures at the consultation. It is important to discuss specific desires and outcomes before committing to surgery. It is also essential to mention previous surgery and knowledge of general health will help assess fitness for general anaesthetic. At the end of your consultation you should be clear about incisions, areas to be treated, other procedures and potential outcomes. If you are unclear about any aspect of your care or the procedure itself you should contact Mr Dheansa (contact details below) to clarify the situation before committing to surgery.

As you will be awake during the procedure you can, if you like, bring in some music that you would like to listen to.

How is it done?

Mr Dheansa will usually go over the procedure with you before taking you to the operating theatre. Once in theatre you will be asked to lay down on the operating table and the area(s) to be operated on will be marked out. You will be given an injection around the area(s) to be treated. The injection often stings as it goes in but soon after the area will become numb; you may however be able to feel pushing or dull touch. This is normal. You should not feel any pain during the procedure. Once the area is numb the appropriate area(s) will be cleaned with antiseptic and protective sterile drapes (sheets) placed around them. It is important to avoid touching the area to be treated from this stage on to avoid the risk of infection.

If appropriate any samples will be sent for analysis. During the operation you may hear beeping/buzzing. This is the cautery machine and is a normal part of the procedure.



POST-OPERATIVE (Minor Surgery)

If at all possible dissolving stitches placed under the skin will be used. This avoids the need for stitch removal.

Once the operation is over you will have a dressing applied and soon after you will be able to go home.

What about Dressings

Your dressing will depend on what and where you have had surgery. Commonly you will have a short term dressing or one which should stay intact until you see Mr Dheansa again. He will indicate which of the options listed below should be followed.

Option 1: Keep your dressing intact until your appointment. You can shower with this dressing. If it peels at the edges you can trim it with some scissors. If the dressing comes away completely do not be concerned. If there are any problems contact Mr Dheansa.

Option 2: Keep the dressing on for 24/48 hours. You can wash/shower with the dressing. The dressing should be easy to peel off. The exposed wound can be safely washed but ensure that you keep it dry between washes. Leave any scabs intact – they will separate in their own time.

What happens after the surgery?

Once the operation is over you will be asked to rest for a few minutes before going home. Follow up arrangements will be made before you leave. An appointment to review you and your wound is usually made for a week or two's time. If you have any questions or are unsure of what to do once you are home please make sure you ask Mr Dheansa.

You will be given some post-operative instruction. It is important to read and hold on to these

Follow Up and After Care

At your follow up visit Mr Dheansa will check to see that everything has healed well and if necessary change the dressing or remove any sutures.

At this stage you will be advised on how to look after your newly healed wound and what to expect over the next few weeks and months (see below).

The results of any analysis can take a few weeks to arrive so do not be disappointed if they are not available at your first post-operative visit. You will be informed of the results as soon as possible

POST-OPERATIVE (Minor Surgery)

After care also depends on where you have your wound as well as what type of surgery you have had. Mr Dheansa will indicate which of the options listed below should be followed.

Option 1: Once everything has healed it is best to moisturise the area with a simple cream such as E45. Apply it along the scar twice a day. Two weeks or so after all has healed you can begin to massage the scar along its length with firm strokes to help it mature. It is best to continue this for at least 6 weeks.

Option 2: Once everything has healed apply Micropore tape along the scar and keep it on continuously. You can shower/wash with the tape on. If it peels remove it and apply some more. Keep it on for 6 weeks if possible.

Avoid sunlight on the scar for the first year to avoid it getting burnt and then subsequently dark. It is very hard to make it pale again. Mr Dheansa will advise you of any further precautions or actions if required.

What can I do and not do at home?

It is best to take it easy for the rest of the day and make sure you take some simple painkillers as soon as you can. The local anaesthetic may take a few hours to fully wear off and it is best to take painkillers regularly for the first day or so.

You should be able to wash straight away but it is best to avoid soaking (e.g. a bath or swimming) your dressing/wound until everything is healed.

What should I expect post-op?

Some soreness should be expected as well as mild swelling or bruising. Sometimes you may notice a little ooze from the wound. This is not unusual.

Will my scars change?

All scars go through a maturing process and go through a series of changes before settling down. This process varies from person to person as well as from site to site on the same person. Generally once a wound has healed the scar will be a thin pale line. Over the ensuing 6-12 weeks the scar may become raised, pink and wider. It often becomes itchy too. It then stabilises before slowly becoming flatter, paler and less itchy. This can take up to a further 12-18 months. Even after this time scars continue to improve but at a much slower rate.

Avoid sunlight on the scar for the first year to avoid it getting burnt and then subsequently dark. It is very hard to make it pale again. Mr Dheansa will advise you of any further precautions or actions if required.

What Are The Potential Risks?

Are there any potential risks?

There are potential risks and complications with any operation and it is important to be aware of them before committing to any surgery. You may also have particular circumstances that affect the final outcome and these will be discussed with you at your consultation.

Abnormal Scars

Sometimes even if all heals well a patient may develop abnormal scars (pink, wide, raised and itchy). Patients may already have noticed such a tendency from previous scars. Such scars take a very long time to settle (up to 18 months) and may be difficult to treat.

Anaesthetic

Anaesthetic can sometimes cause a reaction though this is very rare.

Asymmetry

People are rarely exactly symmetrical and the intention of any surgery is to get both sides as equal as possible. However, the healing process is not always predictable and may result in minor differences from one side to the other.

Bleeding

Rarely there may be significant bleeding under the skin that does not settle. Should this occur you may have to return to theatre to control the bleeding. This should not have any long term effect should it occur.

Bruising/Swelling

Some patients may experience some bruising. This often results in increased swelling and some tenderness. The skin may become discoloured and take a few weeks to settle down.

Delayed Wound Healing

Sometimes if there is a lot of swelling or bruising or infection the wound may open up. In such circumstances you may need to have dressings for a few weeks and the resulting scar may be less than perfect.

Dog Ears/Change in Contour

Some wounds can result in a slight dip in the middle if the tissues are not elastic enough. Dips tend to improve over time. Conversely the ends of a wound may have slight bumps (dog ears) which again usually settle but may require a minor procedure to correct.

Numbness

The treated area will lose sensation (feeling) after the operation and it will take several weeks for it to return. Some areas may remain numb.

Pain

Usually controlled with painkillers and again often resolves within a week or so.

Recurrence

Rarely, a cyst that was removed may come back. This may also rarely occur if a mole has been removed by the shave technique. In such cases it is usually easy to remove it again.

Wound Infection

Wounds can get infected. If you notice increasing redness, pain or an offensive odour from the wound, contact Mr Dheansa as soon as possible. If this should occur you will need to have antibiotics and frequent dressings. The wound may take longer to heal.

Need Advice - Contact Us

Frequently Asked Questions

How long is the operation?

Usually about 30 minutes

When can I shower?

See 'What About Dressings'

How long should I keep taking the pain killer?

1-2 days but sometimes you may need to take them longer

Contact Information

General Enquiries

Call Debbie Lovell or Kelly Walter

Tel: 01342 330 383

Email: enquiry@my-plastic-surgeon.co.uk

Post-Operative Enquires

Call Debbie or Kelly or out of hours call the hospital switchboard where you had your procedure and ask to speak to the RMO (Resident Medical Officer).

The McIndoe Centre

Holtye Road, East Grinstead, West Sussex, RH19 3EB

Tel: 01342 330 300

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Povey Cross Road, Horley, Surrey, RH6 0BB

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Connect with Us

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