

Split thickness skin grafts

This leaflet explains more about returning to your everyday activities after your split thickness skin graft. If you have any further questions, please speak to a doctor or nurse caring for you.

What is a split thickness skin graft?

You have had surgery to move skin from one part of your body to another. This causes two wounds, a graft site and a donor site.

The donor site is the area where the skin has been taken from to cover another area. Your donor site is:

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The graft site is the area where the donated skin has been put. Your graft site is:

.....

When I leave hospital

Someone must drive you home from hospital.

If the graft site is on your arm or leg you need to keep it lifted up above your heart (elevated) as much as possible.

Make sure you have been given your discharge summary and information about your follow-up appointment with the consultant.

Also make sure that you have all the medicines you need and know how and when to take them and that you have telephone contact numbers for the hospital (see below).

After I leave hospital

Have at least one week's rest, with someone to help you with things like cleaning, shopping, cooking, housework, laundry and childcare. For the skin graft to work it is important not to do things that might make your dressing move and knock the skin graft out of place.

Skin grafts to legs, arms, feet or hands will need at least two week's rest.

Further rest may be needed depending on the size and place of the graft, which will be discussed with you.

If the graft is on your leg or foot you will need to raise (elevate) the leg or foot whenever you sit down, including car journeys. You must not drive yourself until the team tell you the graft is stable enough - it may damage your graft if you do.

If the graft is on your hand or lower arm you will need to elevate the hand and arm e.g. using a pillow.

Keep moving around your home and take gentle exercise to stop your joints getting stiff and help prevent any blood clots. If your skin graft was to your lower limb then you should move slightly less so you don't stop the graft working.

Make sure you have a healthy diet and plenty of fluids to help your wound heal.

Do not smoke as this delays the healing process.

Looking after my wound

In the first three or four days after your operation, the donor site may ooze a lot of fluid (exudate), so you may have a bulky dressing put on it to soak it up. This may be reduced before you leave hospital or left as it is until your first follow up appointment in the plastic dressing clinic (PDC). If the dressing leaks, contact either the PDC or your GP so it can be inspected.

There may be a slight smell from the area due to the amount of fluid. This is completely normal, so try not to worry about it.

The skin around the graft site may be a bit bruised, but will heal in time.

Will I be in pain?

Your donor site wound is like a graze and may be painful for seven to ten days after surgery. You may also have pain from your skin graft site. Take regular pain relief and elevate the area if possible to help with this.

When can I get back to normal activities?

Do not drive for one or two weeks or until the wounds have healed and you have no pain. If the skin graft is on the arm, leg, back or abdomen this may be longer, and the nursing or clinic staff will discuss this with you. Your operation may affect your car insurance so you should also contact your insurance company.

Do not go back to work for at least two weeks. The amount of time you need to be off depends on the type of job you do and how quickly you get better. You can discuss this with the nursing or clinic staff or you can ask your GP.

Avoid sport and exercise regimes for at least two to four weeks. Discuss this at your follow up appointment at the PDC or with your GP.

What should I do if I have a problem?

You will only be discharged when the medical and nursing staff think it is safe for you to go home. Watch for the following once you are at home.

Bleeding

If you bleed after leaving hospital apply firm pressure to the area for 15 minutes. If it doesn't stop, continue to apply pressure and go to the nearest emergency department (ED or A&E).

Skin graft failure

Small areas of the grafted skin may not take, meaning the wound takes longer to heal. This can be treated with dressings over time so we will not usually need to do another skin graft.

Slow healing of the donor site

This can happen if the dressing slips off or is taken off too early. A well secured and checked dressing should prevent it. This may mean the dressing is checked for leaking only and left alone if dry.

Infection

Signs of infection include redness, swelling, increased pain, heat and discharge from the wound. Contact your GP or the PDC straight away if you notice any of these signs, as an infection will need to be treated with antibiotics. Out of normal working hours go to an emergency department (ED or A&E) or an urgent care centre. **Do not delay** getting medical attention, as an infection can become life threatening if left untreated.

Altered sensation

The skin around the skin graft and donor site may be numb at first, but the feeling normally comes back. The numbness usually gets less over time, although sometimes it can last long-term or be permanent.

Scars

Your scar may be red and lumpy and may take more than 12 months to settle down. There is a chance it will stay raised and noticeable. When all areas have healed and the dressings have been removed, you should wash and dry the area normally. You should also moisturise and massage the scar twice a day with a non-perfumed cream e.g. E45, Diprobase, Vaseline Intensive Care, 50/50 ointment.

Important: remember, if you have bleeding which you can't stop or notice signs of infection, go to your local emergency department (ED or A&E).

Will I have a follow-up appointment?

You will usually have a follow up appointment about one week after discharge with one of the nurses in PDC to check on your wound, and a follow up with your consultant four – eight weeks later.

These appointments will either be made before you leave hospital, or the details will be given to you by phone or sent by post.

If you have not heard about your appointments within three - four days of your discharge, please contact plastic surgery appointments on 020 8725 5855 who can book this for you.

You may need further follow up appointments in PDC which will be arranged at your first PDC review.

Useful sources of information

www.nhs.uk/Conditions/Plastic-surgery/Pages/How-it-is-performed

www.macmillan.org.uk/information-and-support/skin-cancer/treating/surgery/surgery-explained/what-is-surgery

www.bapras.org.uk/public/patient-information/reconstructive-surgery

Contact us

If you have any questions or concerns about split thickness skin grafts, please contact the plastic dressing clinic nurses on 020 8725 0473 or the lead clinical nurse in plastic surgery by calling 020 8672 1071 and then asking the operator to bleep number 6332 (Monday to Friday, 9am to 5pm). Out of hours, please contact Keate ward on 020 8725 3226 /3227.

For plastic surgery appointments, contact 020 8725 5855.

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit www.stgeorges.nhs.uk

Additional services

Patient Advice and Liaison Service (PALS)

PALS can offer you on-the-spot advice and information when you have comments or concerns about our services or the care you have received. You can visit the PALS office between 9am and 5pm, Monday to Friday in the main corridor between Grosvenor and Lanesborough Wing (near the lift foyer).

Tel: 020 8725 2453 **Email:** pals@stgeorges.nhs.uk

NHS Choices

NHS Choices provides online information and guidance on all aspects of health and healthcare, to help you make decisions about your health.

Web: www.nhs.uk

NHS 111

You can call 111 when you need medical help fast but it's not a 999 emergency. NHS 111 is available 24 hours a day, 365 days a year. Calls are free from landlines and mobile phones.

Tel: 111

