

Post MOHS Surgery Wound Care

Daily Care:

- The day of surgery, keep site dry. Leave dressing in place as applied by the nurse
- The morning after your surgery, you may take a shower; allow the site to get wet with the dressing in place. After showering, remove the dressing
- With a clean cotton swab dipped in hydrogen peroxide (use liberally) clean site. This may help loosen any surface debris
- Pat dry with cotton swab or gauze
- Apply healing ointment (Polysporin, Bacitracin, Aquaphor or Vaseline). Use a generous amount of ointment on your surgical site.

For face/scalp sites:

- For the first 3 days, keep the site covered with a bandage morning and night.
- Then only cover when outside or asleep. You may leave uncovered when at home.

For non-facial sites:

- For the first 3 days, keep site covered with a bandage morning and night
- Then if there is no drainage and the site is covered with clothing, you may leave it uncovered. This will help minimize the reaction to adhesive from the bandage that we commonly see.

Lubrication/moisture:

- A surgical site that is kept moist heals better than one that is dry. A sign of a wound that is dry is the formation of a scab.
- Please keep the wound moist by liberally applying ointment (Aquaphor, Vaseline, Antibiotic ointment) until your follow up appointment

Infection:

- Although infection is rare, please contact the office if you experience any of the following symptoms: fever, unusual warmth, yellow pus from surgical site or increased pain.
- Redness does not always indicate infection and is very common to see redness on the lower legs.

Bleeding:

- Remove the dressing and apply direct, steady pressure with a clean cloth, gauze, tissue for 10-15min.
- If bleeding persists, remove dressing, and again apply direct pressure over the wound for 10 minutes
- If these measures do not stop the bleeding, continue applying pressure and contact the office or go to your local emergency room for treatment
- To minimize the bleeding, if your surgical site is on the face/scalp, minimize lowering your head. If the surgical site is on the legs, use an elastic bandage wrap (ace wrap) or self-adhesive bandage wrap (Coban) over the dressing.

Discomfort:

- Most patients experience little to no discomfort. Do not take aspirin or products that contain aspirin for 2 weeks post-surgery. If you have mild pain, take acetaminophen (Tylenol) or another non aspirin pain reliever.
- If you take baby aspirin daily, you may resume it 2 days after the procedure.
- If you are experiencing significant discomfort, please contact the office

Suture removal:

- Generally, we prefer to use non-dissolvable sutures. However, if for any reason you are unable to return to the office, dissolvable suture can be used.

Activity:

- Please restrict the movement of your surgical site for the next 2-3 weeks (avoid stretching or putting any strain). In the first few weeks, the wound is at an increased risk of opening if caution is not taken.
- You may slowly increase activity
- Please wait 2-3 days before resuming any aerobic activity

Any additional questions:

Please contact our office (847)480-0004 or send your provider a message via your patient portal to communicate with your provider, Rx refill request, update medication list, view patient education specific to your condition