# Information about having skin surgery

#### What is being done and why?

A skin biopsy is removal of a small piece of skin. This is done to confirm or establish a diagnosis so that further treatment can be planned or reassurance given. Skin excision is removal of a skin lump in order to either make a diagnosis or as part of treatment. I should have explained the reason for your skin surgery.

### Will I feel anything?

A local anaesthetic will be used. This means that you will have injections into the skin at the site of the biopsy before surgery. The injections will sting initially for about 60 seconds. However once the anaesthetic has taken effect your skin will be numb, although you may feel pulling or tugging. You will be awake throughout the procedure and will not be sedated or feel drowsy.

### How long will it take?

Usually between 20-40 minutes. Some complex or larger procedures may take longer.

### What happens to the piece of skin that has been removed?

In most cases, the piece of skin removed will be analysed in the laboratory and looked at down the microscope. The result usually takes 1-4 weeks to be reported. I will then know whether the diagnosis has been confirmed or if other possibilities have to be considered. Occasionally further biopsies or surgery will be required.

### What happens after the biopsy?

In order to take the biopsy the skin will be cut or scraped. This will leave a wound / defect. In most instances the wound will be stitched (sutured), in others it will be left open rather like a graze which heals by itself.

If stitches are used these will have to be removed 1-2 weeks later either at Fernbrae / Albyn or at your GP by the nurse. Ideally, you should be available for this to be done (e.g. not on holiday) before the procedure is organised. After stitch removal the wound is weak and will have to be treated carefully to prevent the it breaking down or opening (dehiscence).

In most cases a dressing will be required and this will have to be kept clean and dry. Usually, the dressing can be removed after 2 days and the site washed in the shower as normal.

If the surgical site is on your lower leg you should be prepared after the procedure to rest with your leg elevated for the first 24 hours. You may be advised to minimise walking within this time and for up to 2 weeks to reduce the chance of infection and bleeding. You may feel able to drive after skin surgery but generally it is best not to as you may feel tired, sore or have a dressing on the site.

# What are the risks of having a skip biopsy or excision?

When the local anaesthetic wears off (around 2 hours later) there may be some discomfort at the surgical site and there may be some tightness and limitation of movement. It depends on where the site is and how large the defect was / the complexity of the repair, whether this discomfort will be significant or just a minor hindrance. Paracetamol tablets may be taken if necessary. The discomfort should start to reduce after 3-4 days. If the pain gets worse after four days it usually means there is an infection and you should seek medical help (phone the hospital where you had the procedure or e-mail me).

The skin around the surgical site may be swollen. This normally lasts for 3-4 days depending on the nature, size and site of the procedure. Bruising is also common and lasts 5-7 days.

Because the skin has been cut there could be a risk of infection of the wound. This is particularly the case if a dressing is applied and this is allowed to get wet. If the dressing is soiled or becomes wet it will need to be removed.

As with any cut or skin injury there is always a risk of bleeding. For this reason a dressing is usually required and you will be instructed how to deal with such an eventuality. It will be necessary to restrict

your activity in the days following the procedure. Vigorous exercise may stretch the wound causing it to bleed or burst. The first treatment for bleeding is firm, constant pressure for 20 minutes. Seek medical advice if bleeding persists.

You will have a scar following the procedure although it may not be very noticeable. Each case is different and depends on a number of factors including the nature of the procedure and the site. Scars are permanent and unpredictable. Scars are often become quite red initially especially in pale skinned individuals, fading with time over a period of several years. Sometimes there are obvious stitch marks and depending on the site of the wound the scar can become thickened or stretched. If the scar feels tight and firm, massage of the scar and use of a silicone gel at night over 3 months may help. If there is a danger of structures such as nerves being cut or injured during the procedure these possibilities will be discussed with you. Numbness or altered sensation at the surgical site may occur – often this improves over time

Allergic reactions to dressing, latex rubber gloves, skin antiseptic solutions or local anaesthetics are very unusual. Please let me know if you know you are allergic to any of these items.

# How will I hear about the outcome of this procedure?

I will e-mail you with and write to your GP with the result when it becomes available (2- 4 weeks turnaround). If you like I can also make a follow-up appointment for you in the clinic to discuss the results.

#### Any other questions?

If you have any other questions please get in touch, I will go over everything on the day of the procedure to ensure you are happy to proceed.

Dr. A.G. Affleck

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