**SPLIT SKIN GRAFTS POST OPERATIVE CARE**

**Your wounds have been repaired with a thin split skin graft that has been taken from your thigh. This thin sliver of skin has been stapled, stitched or glued into place. A foam dressing and bandages or plaster overlies the graft. A separate dressing on your thigh covers the graft donor site.**

**Initially, all the wounds will feel numb as the local anaesthetic is still in effect. Before the local anaesthetic effect wears off start taking simple, over the counter analgesia. These include paracetamol and non-steroidal anti-inflammatories (such as Nurofen, Voltaren, etc). Follow the instructions on the pack and only take them if you have no known adverse reactions to them. If you are unsure, speak to Dr McTari.**

**It is normal for there to be some bleeding from the wounds for the first day or two. If this occurs, elevate the area and rest for at least 60 minutes. If there is ongoing bleeding from the thigh dressing, bolstering this with further absorptive pads will usually suffice. The majority of bleeding will stop by itself. If it persists for more than a few days or if you feel unwell, then contact Dr McTari or his rooms. Failing this, present to the Emergency department before seeing your GP. Dr McTari is responsible for your post-operative care, and the emergency departments can more easily get in touch with Dr McTari and manage potential problems. Do not remove the dressings yourself.**

**All dressings need to be kept dry and intact until review by Dr McTari’s nurse in his rooms. If they get soiled or become dislodged before your review please contact Dr McTari to arrange an earlier review.**

**Because of the need to keep things dry, it is usually easier to use baby wipes to properly clean areas close to the dressings. Trying to seal bandages off with plastic bags or Glad Wrap, invariably leads to dressings getting wet, which increases the risk of infection.**

**It is very important to REST and ELEVATE the operated-on limb at all times when you are not moving about. His means eating, reading, watching TV, etc with your foot elevated to at least the level of your hip. If the graft is on your upper limb, then it needs to be elevated on pillows or resting on your opposite shoulder.**

**It is normal for the donor site wound on the thigh to be more uncomfortable than the others. As with all surgical wounds, the discomfort should get a little bit better each day. If this does not occur and is in fact worsening, then please contact Dr McTari or his rooms.**

**Dr McTari’s nurse needs to review the wounds after about 1 week to remove the dressings. However, the thigh donor site dressing usually remains intact and dry for 12 to 14 days.**

**Split skin grafts, particularly those on the legs, usually require ongoing dressings and elevation for at least 5 to 6 weeks. A compression stocking, such as tubigrip, needs to be worn from the toes to knee at all times, except when changing the dressing. This compression aids with wound healing.**

**PLEASE REMEMBER: If there are any issues please contact Dr McTari or his rooms. He would prefer to know of any problems before you go to your GP as HE is RESPONSIBLE for your post-operative care.**