

# **Skin Excision with Local Anaesthetic**

## Why you need a skin lesion excision or biopsy?

You have a lesion (such as a mole, a scar or an ulcer) that requires removal. This is done to diagnose the cause of the skin problem and treat it promptly. This leaflet is to help explain the operation and recovery for patients who are going to have an excision of a lesion.

## What are the aims and benefits of having this surgery?

The main aim is to remove the lesion completely and safely. This is analysed in the laboratory for diagnosis. Sometimes this is known before surgery (for example, if you have had a biopsy by your GP).

Our other aim is to perform surgery with the best cosmetic result that is possible. Again, you should understand the likely outcomes as well as the more rare possibilities and risks before committing to surgery. Remember no guarantees can be made. Please remember to ask plenty of questions.

## What do I need to do to prepare myself for surgery?

Before admission, you should prepare yourself physically and mentally. Stopping smoking and avoiding alcohol are essential parts of this preparation. Understanding the operation will help towards your mental preparation.

It is important to let your doctor or nurse know of any serious conditions you currently have or have had in the past, and any problems that you may have had with anaesthetics, any drugs that you are currently taking and any allergies that you have. You should also inform the doctor if you have a pacemaker or similar device fitted.

If you are taking WARFARIN please ensure you have a blood test done to measure your INR 3-5 days before your operation. Your INR must be 3 or under (unless you have a metal heart valve). If it is above this the operation will not go ahead and you will be re-booked when your INR has been reduced. If you are taking any other blood thinning medication, continue as normal, unless you have been given any specific instructions by your doctor.

Please contact us if you have any queries on 01202 702827

Having understood all the information about the operation, including the potential risks and complications (see below) as well as the benefits, you will be asked to sign a consent form by the doctor and specialist nurse.

## Where to go on the day of surgery?

You will be given a location for your procedure – this will either be at Southface Dermatology Clinic, 1 Avenue Road, Christchurch BH23 2BU or at Nuffield Health Bournemouth, 67 Lansdowne Road, Bournemouth.

If you are attending the Nuffield Hospital please arrive 15-20 minutes before your procedure time.

If you are attending Southface Dermatology Clinic, Christchurch please arrive 5 minutes before your procedure.

Please remember to bring your medication list with you and ask a friend or relative to bring and collect you.

## What does this procedure involve?

A local anaesthetic (LA) is injected just under the skin to numb the area being treated. This injection does sting for a few seconds, but very quickly goes numb. The numbing effect can last several hours and care should be taken. If during the surgery you require more LA, please let the Surgeon know straight away. We want you to be as comfortable as possible.

Once the area for surgery has been numbed, cold solution will be used to clean and sterilise the skin. Please do not touch this area once "prepped". Sterile towels will be used as drapes. Please keep as still as in comfortable, with your hands, arms and legs under these drapes.

The lesion[s] is excised by making an incision around the lesion, including a margin of clear skin and sent to the laboratory for analysis. The wound that is longer than the lesion is closed with stitches. Usually these are the type, which have to be removed.

If non-dissolvable stitches are used on the surface of the skin, we will make you an appointment for you to come back to the clinic to have these stitches removed. You are also able to make an appointment at your local surgery with you practice nurse for this. Stitches usually remain in place for 5-14 days. If dissolvable stitches are used we will instruct you how to care for them.

#### What will happen to the wound and dressings after the surgery?

A dressing will cover the wound and can be removed 48 hours after the operation unless otherwise directed by the nurse. The wound goes through various stages of repair. Initially there will be some scab formation, which usually comes off by about 14 days. After this, it may become a little pink and raised for a few months. Eventually this will fade and become less noticeable.

#### Will the surgery cause discomfort and limit my mobility?

We suggest you take paracetamol as an analgesic [painkiller] if you feel any discomfort. You will find that you can return to normal activities very soon, however, please limit your activities especially in the area of the operation.

If your operation has been on your arm and leg, you may be required to rest these areas. Often this means a sling, or resting with your leg raised. You will receive full directions as to the amount of rest needed but it is often at least 1-2 weeks. Resting the area of surgery is extremely important so please listen to the advice given.

If you have any questions please ask them before your discharge.

#### When will I receive the results of the analysis [histology result]?

You will be given the results of the laboratory analysis [histology] by letter or at a follow up appointment when available; this may take 2-6 weeks from the operation. If you require further treatment this will be discussed either directly with you or information sent by letter in the post.

#### When can I have a bath?

It is not advisable to soak the wound in a bath until it is fully healed. You may shower after 48 hours but you must ensure that the wound is thoroughly patted dry afterwards.

#### When can I resume driving?

It is suggested that you do not drive for a 24 hours, depending on the site of the operation after discharge from hospital. You need to be comfortable to enable you to drive safely and to perform an emergency stop. However, in the end, it is your responsibility and you must decide whether your insurance company would pay in the event of a claim

#### When can I resume work?

You can return to work when you feel comfortable to do so usually the next day. The length of time off will vary depending on the type of work you do and how quickly you recover from the surgery. Please discuss this with the Nurse before leaving the hospital.

#### When can I resume exercise?

Once home you can begin to exercise after the stitches have been removed and when it is comfortable to do so. Start off gently and build up gradually. If it hurts do not do it. Be sensible.

#### When can I resume sexual relationships?

You can return to your normal relationships when you feel comfortable to do so (see discomfort and limitations section). This may vary depending on the site of the surgery. Please discuss this with the nurse before leaving the hospital if you have any questions.

## What are the risks and complications of the operation?

An excision of a skin lesion is a safe operation and complications are rarely seen. All operation have a small risk of side effects, such as pain, bleeding and infection. It is important that you feel well informed about this operation and fully understand the risks and benefits of this surgery. If you have any further questions, please contact the clinic on southfaceskin@gmail.com.

#### **Local Anaesthesia**

Serious problems are uncommon with local anaesthesia. Risks cannot be removed completely, but modern drugs have made it a much safer procedure in recent years. The risk to you as an individual will depend on; whether you have any other illness, personal factors (such as smoking or being overweight) or surgery which is complicated or long. Please discuss any pre-existing medical condition with the Doctor. You must inform the Doctor if you are pregnant as some drugs may affect the foetus.

#### Very common and common side effects

Pain during injection of drugs, feeling sick, palpitations and bruising and soreness.

#### **Uncommon side effects and complications (1 in 1000 people)**

An existing medical condition getting worse.

## Rare or very rare complications (1 in 10,000 or 1 in 100,000)

Allergy to drugs or nerve damage

#### Bleeding (1 in 10)

Bleeding may occur at the operation site. If your wound bleeds, apply pressure directly to the wound for 5-10 minutes and keep the area elevated. If you have had a procedure on the face do not eat and drink hot or spicy foods and avoid alcohol for 24hours. If the bleeding continues contact the clinic on 01202 702827 or out of hours go to the emergency department closest to where you live.

#### Scarring (all) and keloid scar (1 in 100)

Scarring is unavoidable with any trauma to the skin. Occasionally you can get a type of scar called a keloid scar. This is a wide, sometime raised scar, more common to happen on the upper torso, in areas with a lot of movement and in younger people. Please speak to the doctor or clinical nurse specialist if you are concerned about this as they will be able to offer advice on this.

### Bruising/Haematoma (1 in 10)

Bruising may occur at the operation site. If a haematoma (large bruise/collection of blood) should occur, a second small operation may be necessary to remove the blood from the cavity.

### Wound Infection (1 in 50)

As with any wound, there is a potential for infection. Signs might be redness around the wound, increasing pain, discharge (pus) from the wound or feeling unwell and feverish. If infection occurs, it may be necessary to have a course of antibiotics. The wound edges occasionally do not heal quickly and may need special dressing. If you have any concerns about your wound, please contact southfaceskin@gmail.com or your GP.

#### Pain (1 in 50)

If you experience any pain once home, rest and take painkillers such as Paracetamol as required (although you should not take more than 8 tablets in a 24 hours period). Do not take aspirin or ibuprofen unless it is prescribed by your doctor for another condition as this may encourage bleeding. If the pain is not controlled with regular Paracetamol please contact <a href="mailto:southfaceskin@gmail.com">southfaceskin@gmail.com</a> or your GP.

#### Numbness or nerve pain (1 in 50)

Nerves during the excision can be bruised or cut causing numbness in the surrounding wound/scar area. This may be temporary but can be permanent. Sometime as the body is repairing itself, you can experience nerve pain. Please speak to your Doctor or Nurse if you are concerned about this as they will be able to offer advice on this.

#### **DVT and PE (very rare with local anaesthesia)**

Blood clots can develop in the legs. These are called deep vein thrombosis (DVT). Rarely, part of this clot can travel to the lungs; this is called a pulmonary embolism (PE). This is a serious problem and although very rare (1 in 1000), usually due to immobility after a procedure, it can be fatal. We therefore suggest that whilst elevating your limbs that you do foot/calf exercises by lifting the foot up and down and rotating in a circle hourly during your period of immobility to reduce the risk of a DVT.

#### Dehiscence (1 in 50)

Occasionally the wound can open this is called dehiscence. This may happen as a result of infection. Other common reasons are diabetes, age, being overweight and strain on the wound edges from movement of the skin. If this occurs please see your practice nurse at your surgery or contact southfaceskin@gmail.com. The nurse will pack the opening with dressings until it heals and will leave a wide scar.

#### Recurrence and Further treatment (1 in 200)

We aim to completely remove the lesion, however, despite this, it may on analysis be found close to the surgical margins or be a type of skin cancer that requires a wider excision to remove a larger margin of clear skin around lesions such as Melanoma or Squamous Cell Carcinoma. Skin Cancers may recur at the scar site or spread to the lymphatic system and will require further treatment.

#### Can I change my decision about having treatment?

You are not under any obligation to have surgery and can withdraw your consent at any time. Alternatives to surgery are available should you wish to discuss these. Only you can decide whether to go ahead with the operation. Ask lots of questions until you are happy that you have got all the information that you need.

#### What other information and support is available?

Additional information will be given to you in the form of a patient information leaflet. Do feel free to speak to a member of staff if you have any questions or anxieties.

#### Who can I contact if I have a problem or need further information?

Contact us on southfaceskin@gmail.com or 01202 702827.

### Other agencies that offer support and information

#### Macmillan Cancer Support - Freephone 0808 808 2020 www.macmillan.org.uk

Macmillan offers a range of support for the emotional and practical impacts of living with cancer, for you, your family and friends. From giving you someone to talk to, providing information about what to expect or what financial help is available through cancer support groups, they are there to help.

#### Wessex Cancer Trust - 023 8067 2200 www.wessexcancer.org

Wessex Cancer Trust is a Southampton based charity that offers help, information and advice to patients who have cancer. The trust provides leaflets, complementary therapies and has its own counsellor who is available to patients and families who have been affected by cancer.

#### British Association of Dermatologists [BAD] www.bad.org.uk

The BAD offer information on their website

#### Cancer Research UK www.cancerresearchuk.org

Cancer Research UK offer information and support.