



POST OPERATIVE PATIENT INFORMATION

Removal of Lesions / Neck Masses

1. Keep the operated area dry unless otherwise instructed.
2. Avoid or minimize facial movements around the operated area by limiting chewing and facial expressions. Also limit movement around any lesion removed from other body areas.
3. If you have a pressure dressing (large dressing or head wrap) over your incision, you may remove it carefully in 24 hours.
4. Steri-strips (tapes on the skin) should be left in place as long as possible. If the tapes curl up before your first scheduled postoperative visit, then trim the edges with a scissors close to the skin, to help avoid this coming off too soon (within the first 48 to 72 hours after surgery).
5. If your incisions were not taped, you should cleanse the area 4-5 times a day with hydrogen peroxide and tap water at a 50/50 ratio, then apply an antibiotic ointment. If none is prescribed, purchase Bacitracin or Polysporin from your local pharmacy. (NOT NEOSPORIN)
6. If a crust forms around the incision line, or over the area, do not remove it, except by cleaning-- See #5.
7. Notify the office if you have pain of increasing intensity or pain not relieved by either the prescribed medication, or over-the-counter Tylenol.
8. Some swelling or redness may be expected just after the procedure. Notify the office if this swelling or redness worsens.
9. Contact the office to schedule your postoperative visit for suture removal (5-10 days) or staple removal (10-14 days).
10. Anyone having a general anesthetic should not participate in any activity requiring mental alertness, physical coordination, or balance; e.g., driving, bicycling, etc., for 24 hours after the anesthetic.
11. Avoid alcoholic beverages for the first 24 hours after surgery.
12. Cosmetics may be used over the operated areas beginning 24 hours after all sutures and/or staples are removed if no open wounds or scabs are present. During the healing process, good skin care is recommended in the operated area. If you routinely use creams or lotions on your face, it is acceptable to use them on the healing incision as well. All applications near or over the incision lines should be made parallel to the incision line in order to minimize tension on the tissues.



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EAR, NOSE & THROAT
head and neck surgery

Randall S. Lomax D.O.

14. What to expect: All incisions leave scars. Your scar will be designed and placed, as much as possible, to blend with your facial contours. A 'good scar' is one which is no more than a fine line, level and even with the surrounding skin, and causes no contracture, pull, or distortion on the surrounding structures. Scars will mature and change toward this end for up to one year after your procedure. Some areas of the face and neck due to thickness of skin, tension or movement, may scar more than others.

If you are uncertain about any of the above items or have any questions, please contact our office at (702) 834-5886 from 8:00 a.m. to 5:00 p.m. Monday through Friday. After hours, if you have an emergency, go to the emergency room or call the office number and you will be connected to the on-call physician.

My postoperative instructions have been explained to me, I understand their meaning and a copy has been given to me.

Patient/Family: _____

Date: _____

Nurse: _____