



University  
Hospitals Sussex  
NHS Foundation Trust

# Minor skin surgery (dermatology surgery)

Dermatology

Patient information

## What is this information about?

This information is about minor skin surgery. Minor skin surgery is a small operation on your skin. A small operation is often called a procedure.

### This information tells you:

- where you might have your operation
- about the different types of minor skin operations
- what you should do before your operation
- what happens during your operation
- what you should, and should not, do after your operation
- what side-effects you might get after your operation
- which side-effects mean that you should seek medical advice
- how soon you can expect the results of any tests on samples of your skin taken during your operation
- how you can contact us.

## Why have I been given this information?

You have been given this information because you will be having a minor operation on your skin. The information in this leaflet will help to answer the questions you may have. It explains:

- what to expect from your operation
- how to get ready for your operation
- what to do after your operation.

The advice in this information, if you follow it, can:

- help your operation to go as well as possible
- help you to recover as well and as quickly as possible.

# Where do you do minor skin operations?

## In West Sussex:

### We do minor skin operations for adults at:

- the Dermatology Unit, Southlands Hospital, Shoreham
- the Dermatology Unit, St. Richard's Hospital, Chichester
- the Outpatients Department, Worthing Hospital.

### We do minor skin surgery for children at:

- Bluefin children's ward, Worthing Hospital
- the Dermatology Unit, Southlands Hospital, Shoreham.

## In East Sussex:

### We do minor skin operations for adults at:

- Brighton General Hospital.

### We do minor skin operations for children at:

- The Royal Alexandra Children's Hospital, Brighton.

## How will I know where I will be having my operation?

**Do** check your appointment card or letter. It will tell you where you need to go for your operation.

### Be aware

This may not be the same place that you have had Dermatology appointments before.

## **What type of operation am I going to have?**

We will tell you what type of operation you are going to have when we see you in the clinic.

## **Will I have a local anaesthetic (medication used to numb your skin so that you will not feel pain) while I have my operation?**

Yes, you will have a local anaesthetic. This means that you should not feel any pain. You will be awake during your operation.

## **What types of minor skin operations do you do?**

Many of the operations are done to remove or destroy skin lesions. A skin lesion is a damaged or diseased area of the skin.

### **The types of minor skin operations are:**

#### **Curettage and cautery**

- This is a simple procedure where the lesion is scraped from the skin using a curette. A curette is a small surgical tool which may have a hook or scoop at the end.
- The area which has been scraped is then burnt with diathermy (electric currents which heat the skin) to stop bleeding and seal the wound. This is called cauterising the wound
- We may repeat this process 2 or 3 times on the same area of your body during your visit.

## Shave excision (excision means removing body tissue)

- This is a simple procedure where a lesion, which is usually above the skin surface, is shaved off by a surgical blade.
- The area is cauterised with a light diathermy to stop the bleeding.
- No stitches are used, and the wound normally takes 2 to 4 four weeks to heal.

## Punch biopsy

- This is used to take a skin sample which is looked at closely to help make a diagnosis.
- A circular blade attached to a handle is used to cut out a sample of skin. The blade can be from 2mm to 8mm across according to the size of the sample that we need.
- We use cauterisation or stitches. These might be stitches that dissolve or stitches that do not dissolve.

## Excision with primary closure

- This is the most common type of surgery.
- We excise a lesion and some of the skin around it (the margin around the lesion). We close the wound using 2 layers of stitches. The first layer of stitches are stitches that dissolve. These are placed deeper in the skin. The next layer of stitches may be either dissolvable or non-dissolvable. They are put into the top of the skin to close the layers.

## Excision with healing by secondary intention

- We do this type of surgery where the skin is tight or infected or on concave areas of the body (areas that dip inwards). These include the ear or the inner side of the eye or lips. The wound from the operation is left open to heal naturally. This can take weeks or months to heal completely. It will depend on the size of the wound and where it is on your body.

## Excision by skin flap

- In this procedure tissue is partly detached, moved, or lifted from a donor site (another part of the body) near to the lesion. It is then used to cover the wound.
- We then stitch the wound in a similar way to when we do excision with primary closure.

## Nail matrix biopsy

- In this procedure we take a piece of tissue from a growth or a mole underneath the nails of the hands or feet.
- We may have to remove the nail completely to do this. You will not feel any pain, due to the local anaesthetic.

## What should I do before my operation?

- **Do** arrange for someone such as a relative or friend to come with you to the surgical department where you are having your operation if you can.
- You should not drive for 4 hours after your operation.  
**Do** plan how you will travel to and from your operation.  
Book a taxi or arrange for a friend or relative to drive you.
- **Food. Do** eat breakfast or lunch as usual before your operation

- **Clothes.** Wear loose fitting, comfortable clothes.
- **Medications. Do bring** a list of any medications that you are taking with you.
- **Blood thinning or antiplatelet medication:**
  - **Do** tell your Dermatologist know as soon as possible if you are taking any blood thinning medications like Warfarin, Apixaban, Aspirin or other forms of blood thinning medication or antiplatelets.
  - We may tell you not to take some doses of blood-thinning or antiplatelet medications around the time of your operation.
  - If you are taking warfarin do check your INR level within 5 days before your surgery. If the INR is less than 3 we can go ahead with your operation.
  - **Do** bring your yellow warfarin book with you when you have our operation.

## Be aware

If the INR is more than 3, you will not be able to have the operation as the risk of bleeding is very high. If your INR is above 3, do get in contact with the dermatology team using the contact details which are further on in this information.

- **Allergies. Do** let your Dermatologist know if you are allergic to any medicines, latex, or any local anaesthetics.
- **Pacemaker or ICD. Do** let your Dermatologist know if you have a pacemaker (PPM) or Implantable cardiac defibrillator (ICD), unless you have already done so in your last clinic visit. If you are unsure, contact us using the contact details at the end of this information.

- Having a pacemaker will not stop your operation. We may need to change the instrument we use for cauterisation.
- If your pacemaker is close to the surgery site or if you have an ICD, we need to know in advance to make special arrangements.
- If you have a pacemaker card, bring it with you.
- **Other implanted devices. Do** tell us if you have a:
  - cochlear implant
  - brainstem stimulant
  - implanted loop recorder.
- **Contact lens. Do** remove your contact lens if we are doing any surgery around your eyes. This includes your eyebrows, cheeks, nose, and forehead.
- **Consent form.** We will ask you, or your parent or guardian if you are under 16 years old, to sign a consent form. Signing the form indicates that you are fully aware of the procedure and the possible complications and agree to have the operation.
- **Bring something to do.** You may wish to bring a book or magazine with you so that you have something to do during times when you are waiting. There are sometimes delays as operations can take longer than planned.

## What will happen just before my operation?

- **Undressing.** We sometimes ask you to remove your clothes and put a hospital gown. This is so that we can clearly see the area we are going to operate on.
- **Marking the area of the skin.** We will mark the area of skin that we will remove in the operation with a skin marker pen.
- **Local anaesthesia.** Your operation, including giving you your



anaesthetic, will be done by your doctor or a nurse who is specialised and trained to do skin surgery.

- We will give you an injection of the local anaesthetic Lignocaine (with or without Adrenaline). This might cause stinging for a few seconds.
- You may feel the numbing effect of the anaesthetic for around 2 to 4 hours after the surgery.
- **Be aware**, if you have had an operation around your mouth avoid drinking or anything hot for up to 3 hours afterwards.
- For children, we sometimes put a cream called Emla or Ametop on the place where we will be giving the local anaesthetic injection. We do this 30 to 60 minutes before the local anaesthetic to reduce the stinging feeling of having the local anaesthetic.

## What do I need to know about looking after myself and being safe after my surgery?

- **Driving. Do not** drive for 4 hours after the surgery.
- **Arranging to have your stitches (sutures) removed.**
  - **Do** contact your GP as soon as possible to arrange to have your stitches removed, unless we have only used dissolvable stitches. Your stitches should be removed at your GP Surgery 7 to 14 days after your operation.
  - We will give you written information about how many stitches you have in your skin and when they should be removed.
- **Pain relief.**
  - The numbing effect of the anaesthesia will usually go after 2 to 4 hours.
  - If you feel any pain, please take Paracetamol or Co-codamol tablets.

## Be aware

Do not take Aspirin or Ibuprofen unless they are part of your regular prescribed medication. They may increase the chance of you bleeding.

- **Caring for your wound.**

- **Do** keep the site of your surgery (your wound) clean and dry for at least 48 hours (two days) or until you have your stitches removed.
- **Be aware**, this might make it difficult for you to have a bath or a shower during this time.
- We ask some people to remove their dressing after a few days. If we ask you to do this **do** follow these instructions:
  1. wet the dressing first before you try to remove it.
  2. wash your wound with soap and water.
  3. pat the wound dry.
  4. make sure your hands are clean.
  5. put a thin layer of Vaseline from a new pot over the wound. You can use the same pot of Vaseline for all your dressing changes for this wound.
  6. put a new dressing over the wound.

## Be aware

We sometimes use Steristrips (small sticky strips) underneath your main dressing. If you find it too difficult or uncomfortable to peel them off do not worry. They are likely to fall off over the next few days by themselves.

- **Exercise.**

- **Do not** do any heavy exercise like tennis, football, swimming, or golf while you still have your stitches in. We might ask you not to exercise for up to 3 weeks after your operation.
- **Avoid swimming**, or anything else like having a bath which would mean your wound would be in water, for 2 weeks after your operation. This will reduce the chance that your wound may get infected.

- **Going on holiday or travelling overseas.**

- Be aware that if you are planning to go on holiday or travel overseas you must still follow the advice on:
  1. keeping your wound dry and clean for a minimum of 48 hours (2 days).
  2. avoiding swimming for 2 weeks.
  3. possibly needing to have an appointment at your GP Surgery to have your stitches out 7 to 14 days after your operation.

If you need to postpone your appointment for your operation **do** contact the Dermatology Department secretaries.

- **Smoking.**

- Avoid smoking for the first week after your surgery. If you smoke your wound can take much longer to heal.

## **What side effects or problems might I have after my operation?**

- **Infection.** It is rare to get an infection after a minor skin operation. If you have a wound infection the symptoms might be any of the following around the area where you had your operation (the surgical site):

- swelling.
- redness. In black or brown skin this may be more difficult to see and could appear as an area of darker skin.
- pus (thick, yellow liquid) formation.

## Be aware

If you get any of these symptoms or think that you may have an infection do seek urgent advice. Contact your GP or practice nurse or speak with our nurses in the Dermatology Department. It is important that you do this as you may need antibiotics (medication to fight the infection).

- **Bleeding and bruising.**

- **Bleeding.** It is rare to bleed after a minor skin operation. If you do notice any fresh blood coming from your wound do apply pressure over the site. Do this for 15 to 20 minutes. You may need to repeat this every 5 minutes for 4 to 5 times. This is usually enough to stop the bleeding. If it does not stop the bleeding your wound may need to be stitched or cauterised again.

## Be aware

If the bleeding does not stop after you have applied pressure for 4 to 5 times or you are concerned about bleeding do speak with your GP, practice nurse or our Dermatology nurses.

## Be aware

**Bruising.** If you have a minor skin operation close to your eye it is likely that you may have bruising around your eye (a black eye).

- **Fainting and nausea (feeling sick).** You may feel faint (dizzy or lightheaded) or you may faint or feel sick when you are having your operation or after it. Please tell your Dermatologist if you feel faint, sick, or unwell. These symptoms usually settle down in 15 to 20 minutes.

Do remember to tell your Dermatologist or nurse before your operation if you have any previous reaction to local anaesthesia.

- **Wound breakdown (dehiscence).** This when your wound re-opens. It is not common after a minor skin operation. It can happen just after your stitches are removed or if your wound is infected or bleeding.

### Be aware

If you think you have wound breakdown or you are concerned about your wound do speak with your GP, practice nurse or our Dermatology nurses urgently.

- **Numbness and nerve damage.** This can sometimes happen around the area where you had your operation. Small or large nerves can be damaged during skin surgery. This can give you a small numb area around your wound. This will usually get better. Sometimes it does not get better, and you may be left with some pain or numbness.
- **Scars.** You will have some scarring after your operation. We cannot do anything that will stop you from having any scarring at all. When you have skin surgery the scar that is left is usually around three times wider than the lump or area of skin that is removed.

- If you have had an operation before that has left you with more scarring than was expected, please let your Dermatology Team know.

Some people get keloid scarring after a minor skin operation. A keloid scar happens when a scar keeps growing and covers a larger area than the original wound. There is a greater chance that you may get a keloid scar if your operation was on your chest or back or if you have black or brown skin.

- You can reduce the chance that you may get severe scarring by taking good care of your wound (the site of your operation). For example, avoid putting tension on the area around your wound (doing things that would make the skin around your wound stretch or become tight). It also helps if you regularly massage your operation site with Vaseline after you have had your stitches out.

## **What should I do if I have any questions about the possible risks, problems, or side-effects of having my operation?**

### **Be aware**

As with any type of surgery there is a small chance that there may be side effects or problems, but for most people the benefits of surgery outweigh the risks. If you have any questions or concerns about possible risks, problems or side effects please do talk to your Dermatologist about them before you have your operation.

## **When should I get the results of the tests that you will do on the skin sample taken at the time of my operation?**

After your operation we will send your skin sample to a laboratory. They will report to us on what they find out about it.

We will usually let you know the results by sending you a letter around four weeks after your operation or by telling you at your next Out-Patients appointment.

If you have not had the results by six weeks after your operation, please contact the Dermatology Department.

# Contact details

## West Sussex

### Dermatology Department

(Southlands Hospital, Worthing Hospital, St Richard's Hospital)

### Waiting list admissions team

01903 205 111 Ext. 83992

### Dermatology Nurses

01273 455 622 Ext. 83607 or 83212

### Dermatology Admin team

01903 285080

### Dermatology team email

[uhsussex.dermatologysec@nhs.net](mailto:uhsussex.dermatologysec@nhs.net)

### Dermatology team opening hours

9:00 am to 5:00 pm

## East Sussex

### Dermatology Department (Brighton General Hospital)

Phone 01273 665015 or 01273 665030

Email [bsuh.dermatology@nhs.net](mailto:bsuh.dermatology@nhs.net)

Dermatology Medical Secretaries 01273 665 140

### Dermatology Medical Secretaries opening hours

8:30 am to 5:30 am

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