

Surgical removal of facial skin lesion (biopsy)

This leaflet has been designed to improve your understanding of your forthcoming treatment and contains answers to many of the common questions. If you have any other questions that the leaflet does not answer or would like further explanation, please ask.

Facial skin lesion

You have been given this leaflet because you have a lesion on the skin of your face that requires removal. It will already have been discussed with you that this is the best form of treatment rather than using alternative forms of treatment such as creams, lotions or freezing the area. The removal involves a local anaesthetic. This means you will be awake during the procedure, but the area will be numb and you will feel no pain.

What does the operation involve?

Firstly, the area in and around the skin lesion will be frozen with a local anaesthetic injection. This takes a few minutes to work. An antiseptic solution may then be used to clean the area and special ink used to mark out the piece of skin to be removed. The amount of time that the removal takes will vary depending on the size of the lesion, but typically takes between 30 minutes and 1 hour.

Is anything done after the area is removed?

Removal of the lesion leaves a hole in the skin. This hole can be repaired in one of three ways:

1. If the hole is small, the surrounding skin can be gently pulled together with stitches. Some of these stitches may be dissolvable but often stitches on the skin need removal after a week. Most skin lesions can be removed and repaired in this simple way.



2. If there is not enough loose skin next to the hole to allow the edges to be stitched directly, then a neighbouring area of skin can be partly lifted and moved round to fill in the hole. This is known as a “skin flap”. This “flap” is then stitched into place. Once again, a combination of dissolvable and removable stitches are often used. If it is necessary to raise a flap this does leave a larger scar but wherever possible the flap will be designed such that the scar lies in natural skin creases.
3. If a large area of skin has been removed it may be necessary to repair the wound with a piece of skin taken from elsewhere on your body. This is known as a “skin graft”. Such a “graft” is often taken from behind the ear or just above the collarbone. These sites are chosen because they already have an excess of skin. The graft is then laid over the area where the facial lesion has been removed and sewn into place. A dressing is put over the graft for around 10 days.

Which method of skin closure is best for you will be discussed with you before you sign any consent form for your operation.

Before the procedure

- Eat and drink as normal. It is recommended to have a light meal beforehand.
- Ensure you have some painkillers available such as paracetamol. The surgeon will recommend a simple painkiller to use after the operation.
- Bring a list of your medications with you.
- Continue to take aspirin and clopidogrel as normal. The surgeon will advise you if you are taking warfarin. If you are taking dabigatran, apixaban, or rivaroxaban, do not take on the morning of the procedure.

Information/advice for the first two weeks after your skin surgery

Pain: The local anaesthetic will begin to wear off after one to two hours, after the procedure. If you experience any discomfort from your wound, you can take over-the-counter painkillers, such as paracetamol, that will not interact with any other medicines you are potentially taking. If you are unsure, please contact your pharmacist.

Bleeding/Bruising: The surgeon will stop any bleeding, however if you experience any oozing after the procedure, you will be given some swabs to take away with you. Sit upright and press on the wound for 10-15 minutes. Having some bruising is common. To help reduce bruising and swelling, try to apply ice packs for up to 15 minutes at a time.

Wound management: We advise to keep your dressing dry for the first 48 hours, depending on the clinician's instructions. After 48 hours, remove your dressing and wash the wound with soap and water (shampoo, if on the scalp). The dressing may be easier to remove if you wet it first. Flowing water will help to remove any scabs that may have formed.

If the wound has been covered with an antibiotic ointment at the end of your procedure, please continue to apply this regularly until the stitches are removed. You will be supplied with this medicine.

Infection: It is expected that your wound may be slightly red and tender to touch for the first couple of days, but if it becomes very painful, red and swollen, please contact your GP.

Avoid smoking and consuming alcohol to reduce the chances of infection.

Stitches: You havestitches, which should be removed by your GP practice nurse in.....days.

Sometimes we use dissolvable sutures instead, which do not need to be removed. You will be informed on the day of the procedure.

Scarring: Any wound to the skin will result in scarring. To help improve the appearance of the scar, after two weeks massage the area with moisturising cream or Vaseline daily and use sunscreen lotion over the area. Try to avoid direct sunlight for the next six to twelve months.

If you have a problem or are worried about your progress, please contact us directly by telephone between 9am-4.30pm (weekdays) on: 01709 649065. Alternatively dial 01709 649064 and leave a message.

All other times (including Bank Holidays) please contact Rotherham District General Hospital on: 01709 820000 and ask for the Oral Surgery DCT on duty.

Please note we endeavour to offer appointments as soon as possible for patients with post-operative problems. We do not provide a “walk in” service, therefore it is advisable to telephone the department with any problems you may be experiencing.

Patient Advice & Liaison Service (PALS)

The team are available to help with any concerns, complaints or questions you may have about your experience at the Trust. Their office is in the Main Foyer (Gate 4) of Doncaster Royal Infirmary. Contact can be made either in person, by telephone or email.

The contact details are:

Telephone: 01302 642764 or 0800 028 8059

Email: dbth.pals.dbh@nhs.net