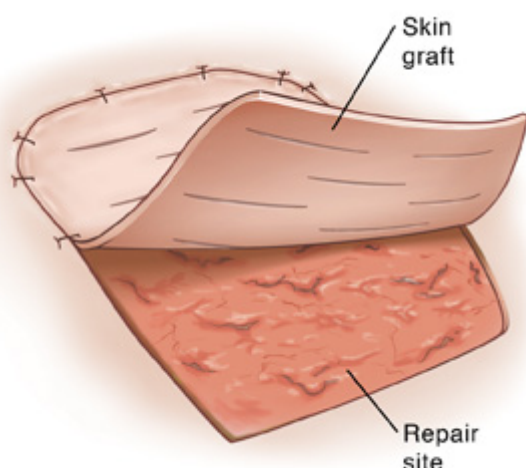


Skin Graft Surgery



A skin graft is a piece of healthy skin (graft) that is moved from 1 part of your body to another. If you have a large wound, a skin graft can help cover it. This lets the wound heal. Or a skin graft can be used to treat a scar. The skin graft can improve how a scar looks, making it less visible. And if scar tissue is tight and restricts movement of the skin, a skin graft can help. The graft can help the skin move more freely.



Getting ready for surgery

Prepare for the procedure as you have been told. Tell your healthcare provider about all prescription and over-the-counter medicines you take. It also includes herbs and other supplements. You may need to stop taking some or all of them before surgery. Follow any directions you're given for not eating or drinking before surgery.

Choosing the donor site

You and your healthcare provider will discuss what site the skin graft will be taken from. This is called the donor site. A split-thickness graft, which is only the top 2 layers of skin, is often taken from the buttock or thigh. A full-thickness graft, which is all the layers of skin, may be taken from the groin or other areas. Your healthcare provider will discuss your choices with you. The type of graft needed depends on the type and location of your wound or scar.

The day of surgery

Before the procedure, you will be asked to sign an informed consent form. This form will give information on the procedure. It will also list the risks, benefits, and alternatives to the procedure. You can ask questions before you sign the form. Make sure all of your questions are answered before you sign the form.

The surgery takes 1 to 3 hours. If the graft is a large area, you may stay 1 or more nights in the hospital. Before the surgery begins:

- An IV (intravenous) line is put into a vein in your arm or hand. This line delivers fluids and medicines.
- You will be given medicine (anesthesia) to keep you pain free during surgery. You may get sedation, which makes you relaxed and sleepy. In this case, local anesthesia is also used to numb the body parts to be worked on. Or you may have general anesthesia instead. This puts you into a deep sleep during the surgery.

During the surgery

- The surgeon cleans the repair site and may remove scar tissue. This is done by making an incision (cut) around the scar.
- The surgeon then takes skin from the donor site in the size and shape needed. A few tiny slits may be cut into the graft, or it may be meshed to prevent fluid from collecting under it during healing. If a full-thickness graft was taken, the surgeon closes the donor site with stitches. If a split-thickness graft was taken, it may be left open to heal. In this case, a dressing (bandage) will be applied to prevent infection.
- The surgeon puts the graft onto the wound or scar area. They position the graft, then stitch it to the surrounding skin. In certain cases, surgical glue is used. A bandage may be stitches over the skin graft.
- At the end of surgery, the donor and repair sites are covered with bandages. If the graft was placed on your arm or leg, you may have a splint. Your healthcare provider can tell you more about what to expect.

After the surgery

You will be taken to the PACU (postanesthesia care unit) to be watched while you wake up from the anesthesia. You will be given medicine to manage any pain or nausea. If you need to stay overnight, you will be taken to a hospital room. Once you are ready to go home, you will be released to an adult family member or friend. You may need to have someone stay with you for the next couple of days to help care for you as your healing begins.

Recovering at home

Once at home, follow the instructions you have been given. Expect some swelling, bruising, redness, and discomfort at the repair site. Your healthcare provider will tell you when you can return to your normal routine. During your recovery:

- Take pain medicine as directed by your healthcare provider.
- Don't smoke, vape, or use nicotine products. Nicotine from any source slows healing.
- Follow all instructions for taking care of the donor and graft sites. Leave bandages in place unless you are told you can remove or change them.
- If you are instructed to change any of your bandages, do so every 24 hours or as directed by your healthcare provider. Wash your hands before and after changing a bandage.
- If you had a split-thickness graft, be aware that the open wound may weep for 2 to 3 days. Clean it and change the dressing as instructed.
- Don't get dirt or sweat on your incisions. Keep the incisions out of water. Bathe or shower only as directed. You may be told to sponge bathe until the graft has healed. Ask your healthcare provider when you can take a shower or bath. Also ask your provider about the best way to keep the incisions dry when bathing or showering. If sutures (stitches) get damp, pat them dry. Change your bandages if they get wet or soiled.
- Once the skin graft has healed and your healthcare provider instructs you to do so, keep the grafted skin moist and lubricated. New blood vessels start growing in 36 hours. But the grafted skin doesn't have oil or sweat glands. Apply mineral oil or lotion to the repair and donor sites every day for 3 to 4 months or as directed.
- Don't pick at scabs. They help protect the wounds.
- Keep the surgical site out of the sun. Cover the donor and repair sites when you go outside. When your healthcare provider says you can, use sunscreen with a high level of protection on the sites. Sunburn or sun exposure can increase scarring.

- Don't do any exercise or movement that stretches the grafted skin for 3 to 4 weeks. Depending on the location of your graft or donor site, your healthcare provider may give you special instructions.

When to call your healthcare provider

Be sure you have a contact number for your healthcare provider. After you get home, contact your healthcare provider right away if any of the following occur:

- Chest pain or trouble breathing (call 911)
- Fever of 100.4° F (38° C) or higher, or as directed by your healthcare provider
- Increased soreness, pain, or tenderness after 24 hours
- A red streak, increased redness, or puffiness near the wound
- White, yellowish, or bad-smelling discharge from the wound
- Bleeding that doesn't stop when you put pressure on the site for a few minutes
- Opening of the edges of an incision

Follow-up

During follow-up visits, your healthcare provider will check your healing. If needed, stitches or staples will be removed. And your healthcare provider will keep track of the results of your surgery. Let your healthcare provider know if you have any questions or concerns.

Risks and possible complications

Risks of this procedure include:

- Infection at repair or donor site
- Bleeding at repair or donor site
- Swelling at repair or donor site
- Skin appearance not improved at repair site (for a scar)
- Skin color mismatch at repair site
- Changed skin appearance at donor site
- Damage to nerves and blood vessels at repair or donor site
- Partial or total graft loss
- Need for additional procedures
- Risks of anesthesia. You will discuss these with the anesthesia provider.

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