

Advice Following Surgical Repair of a Pressure Ulcer



A Guide for Spinal Cord Injured Patients

Doc: Advice Following Surgical Repair of a Pressure Ulcer,
Version 01

NSIC Patient Information Leaflet Group
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This leaflet is for you to take home following surgical repair of a pressure ulcer and designed to help you take care of your skin and the suture line.

- If you have had excision and closure or any other type of repair surgery to a trochanteric, ischial or sacral ulcer you need to apply a protective pad to the scar for up to 6 weeks after discharge and/or until you are seen in Spinal Outpatients. Do not use too much dressing tape. If you are unable to do this for yourself due to the level of your spinal cord injury, a carer or family member may help you.
- Check the scar line daily, or if it is in your seating area twice a day, once before getting out of bed and again on your return to bed. Use a hand held mirror if necessary. If you notice a red area, reduce any pressure on it and do not sit directly on it until the redness fades. If you are unable to do this for yourself due to the level of your spinal cord injury, a carer or family member may help you.
- If there is localised redness, hardness or heat over the scarred area, this could indicate an infection. Stay off the area and contact your family doctor or district nurse.
- Do not worry how your scar line looks, scar tissue can take up to 6 months to fade in colour and for underlying tissue to heal. Scar tissue is tender so take care with all movement and transfers and remember to carry out regular pressure relief whilst in your wheelchair.
- You should have an appointment to be seen in Spinal Outpatients in 4-6 weeks after discharge from hospital.

- For any further advice or to discuss any concerns, do not hesitate to contact St Patrick ward on **01296 315812**, or Spinal Outpatient Services on **01296 315829**, we will be pleased to help you.

Most common areas where pressure sores occur on individuals with SCI

