

PRIORSLEGH MEDICAL CENTRE

MINOR SURGERY ADVICE LETTER

Your doctor has referred you because of a problem that requires minor surgery. This letter tells you what is likely to happen at the appointment before any decision to undertake surgery. I will discuss with you the type of treatment most suitable for your case, as well as any other options possible. In most cases, surgery is undertaken at the same visit. If this is not possible for any reason, including more time to consider the treatment proposed or it is inconvenient for you, it can be arranged on another occasion.

If minor surgery is undertaken, it will usually involve the use of:

A local anaesthetic

This is usually given by injection and numbs the area where the surgery will be performed. In most cases this completely prevents any pain during the operation. The injection itself leads to some pain, but usually only for a few seconds.

Sutures (stitches)

These are usually required to close the wound after surgery and also to prevent bleeding. Other types of wound closures and dressings are sometimes used but this will be discussed with you prior to surgery. Most sutures require removal. This is usually five to fourteen days after your surgery by a nurse at your GP practice.

If you are likely to be going away on holiday or unable to have your sutures removed because of other commitments, it may be necessary to defer surgery. This can be discussed with the doctor if you are in any doubt at the time of the consultation of the surgery.

If a piece of tissue is removed, such as a mole or a cyst;

It will be sent for analysis to Macclesfield Hospital. Some tissues are retained and stored in case further testing is found to be necessary.

Any operation can lead to complications. Complications following minor surgery are uncommon and usually not severe. However it is necessary for you to be aware of the potential complications;

Infection

This is unusual but can be more likely in some types of operation, particularly when there has been infection before surgery.

Bleeding from the wound after surgery

This is also rare in minor surgery but can occur. It can usually be controlled with direct pressure over the wound. Re-operation to stop bleeding and clear out any blood in the wound is occasionally necessary.

Recurrence of the original lesion

The chance of recurrence varies depending on the nature of the treatment. I try to prevent this, but if it does occur it may require further treatment.

Allergy or reaction to local anaesthetic or dressing

This is also rare but a recognised complication. Please inform me if you have any known drug or dressing allergies at the time of your appointment.

Scarring

Virtually all surgery will lead to scarring. Every attempt will be made to minimise this, but depending on the site of the lesion, scarring may be obvious.

Damage to other structure

Such as nerves or large blood vessels during minor surgery is rare. A small area of numbness around the scar occasionally occurs and is unavoidable. This usually becomes smaller or goes completely within a few months.

If these risks are particularly high for your surgery, I will discuss this with you prior to the operation.

This information sheet informs you about the surgery. Before any surgery you must sign a consent form, I will ask you to sign this only when you have read and fully understood the contents of this letter.

You can change your mind at anytime up to the time of the surgery.

Please note, if you have any complications following surgery please contact your GP.

Dr G. Morelli

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