

Wide local excision with general anaesthesia for skin cancer

Department of BESS Surgery [Patient information](#)

This is a guide for anyone having a wide local excision for skin cancer.

What is a wide local excision?

It is a surgery performed under a general anaesthetic (which makes you sleep). We will either remove your old scar or an existing lesion. This will include a wider margin of normal surrounding skin.

What does a wide local excision involve?

Your surgeon will make a cut around the scar. This will be a wider margin of skin than before. This is then sent for testing. Your surgeon will close your wound with either glue or stitches. We may also use a waterproof dressing. If you need your stitches removed, we will tell you.

Why do you need a wide local excision?

We are recommending this to reduce the risk of the cancer coming back.

What are the aims and benefits of a wide local excision?

Removing a margin (extra area of tissue) should reduce the chance of cancer cells returning in this area. We will send the new margin away for testing.

What will happen before the surgery?

You will come to a pre-assessment clinic where you will:

- be asked about any health conditions and tablets you are taking
- have your weight and blood pressure checked
- be screened for risks of infection and blood clots
- have blood tests and may have an ECG (heart tracing) and x-ray
- be told where/when to come on your day of surgery.
- be advised when to stop eating and drinking.

What will happen on the day of the surgery?

Make your way to the surgical unit specified in your appointment letter. Your nurse will admit you and your surgeon will meet with you. This is a good time to ask any last questions you may have.

What will happen after the surgery?

You will return to the ward. If you have a drip (a small needle in your arm attached to a bag to give you fluids into the vein) we will remove this. Please ask for pain relief if you have any discomfort. The area around your wound may be numb. This is because we cut your minor sensory nerves. You will go home on the day of your surgery. Please arrange for someone to collect you. Have someone at home to help you for a few days. You will get an outpatient appointment in the post to see your surgeon. Your appointment will be 2-4 weeks after the surgery to discuss your results.

What will happen to the wound and dressings after the surgery?

Dressings should stay in place until you have your stitches removed. You can ask your practice nurse to change it sooner if you need. Your surgeon will tell you if your stitches need removing. Make an appointment with your practice nurse to have these removed after 14 days. Please make the appointment as soon as possible after your surgery.

What are the possible risks of a wide local excision?

All operations have a small risk of side effects. The following diagram may help you decide how you feel about risk:

People vary in how they interpret words and numbers.
This scale is provided to help.



*Royal College of Anaesthetists 2024

Very common and common side effects (1 in 10 or 1 in 100 people):

Infection and wound breakdown

Signs of infection include a fever, redness, or a bad smell. Please let a member of the team know as you may need antibiotics. Infection may cause your wound to break down, and it will need regular dressings until it heals.

Seromas (tissue fluid) and haematomas (bleeding)

Tissue fluid and blood can collect within the wound. We may need to remove it using a needle and syringe. Very rarely you may need further surgery to stop the fluid/bleeding and remove this.

Scarring

This surgery will leave a scar. This should settle over time. Once it's healed, rubbing a moisturiser or vitamin E cream in may help.

Nerve pain

Tingling and/or stabbing pains are common after this type of surgery. Keep (on) taking analgesia (painkillers) as prescribed. This will settle over time.

Uncommon side effects (1 in 1000 people):

Lost or decreased feeling

We cut some of your minor sensory nerves during surgery. This may make the area around your wound feel numb. For most the loss of feeling should be temporary. For some patients it may last longer.

Rare or very rare side effects (1 in 10,000 or 1 in 100,000):

Blood clots in the limbs (DVT) and lungs (PE)

Blood clots are a risk with all general anaesthetic surgeries. If you have a higher risk, we will take special precautions. This may include wearing stockings. Moving around after the surgery will help to stop clots occurring.

What can you do when you get home?

Washing

Avoid soaking your wound in the bath as this increases the risk of infection. A strip wash or shower is best. Make sure to completely dry the area after bathing.

Work/general life

You can go back to work when your wound has healed. This normally takes two weeks. If your job involves heavy lifting, you may need to take longer. You will get a sick note on discharge. You should be able to return to normal life in 4-6 weeks.

Sport

You should not start any strenuous exercise for 8-12 weeks after your surgery. This could cause your wound to break open. Your surgeon will let you know when it is safe to do so.

Driving

You cannot drive for 24 hours after surgery. Ideally you should avoid driving for 2-3 weeks. Only drive if you feel confident and can make an emergency stop. If in doubt, seek medical advice or check with your insurance company.

When do you get the results of the wide local excision?

You will get an outpatient appointment for around 2-4 weeks after your surgery. We will check your wound and give you the results from your surgery. We will let you know if you need any more treatment.

Consent

We must take your written consent to this surgery by law. We will explain all the risks and benefits. Please do not hesitate to ask us any questions.

Contact details

If you have any queries please contact your consultant skin surgeon, skin cancer nurse specialists, or skin cancer advanced nurse practitioner.

Consultant skin surgeons:

Your consultant's secretary can be contacted on the following numbers:

Mr Perry: 0300 019 4870

Miss Clark: 0300 019 2616

Miss Pearce: 0300 019 2600

Skin cancer nurse specialists: 0300 019 5205

Skin cancer administrator: 0300 019 5465

Skin cancer advanced nurse practitioner: 0300 019 8073

***The above contacts should be available Monday-Friday, 8-4pm. Evenings and weekends please phone your district nurse, 111 or go to the Emergency Department in an emergency.**

Further information

Melanoma Focus- provides information, guidance and support for patients and carers. It has a free helpline **0808 801 0777** answered by expert skin nurses. www.melanomafocus.org/support



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