NATIONWIDE CHILDREN'S HOSPITAL™

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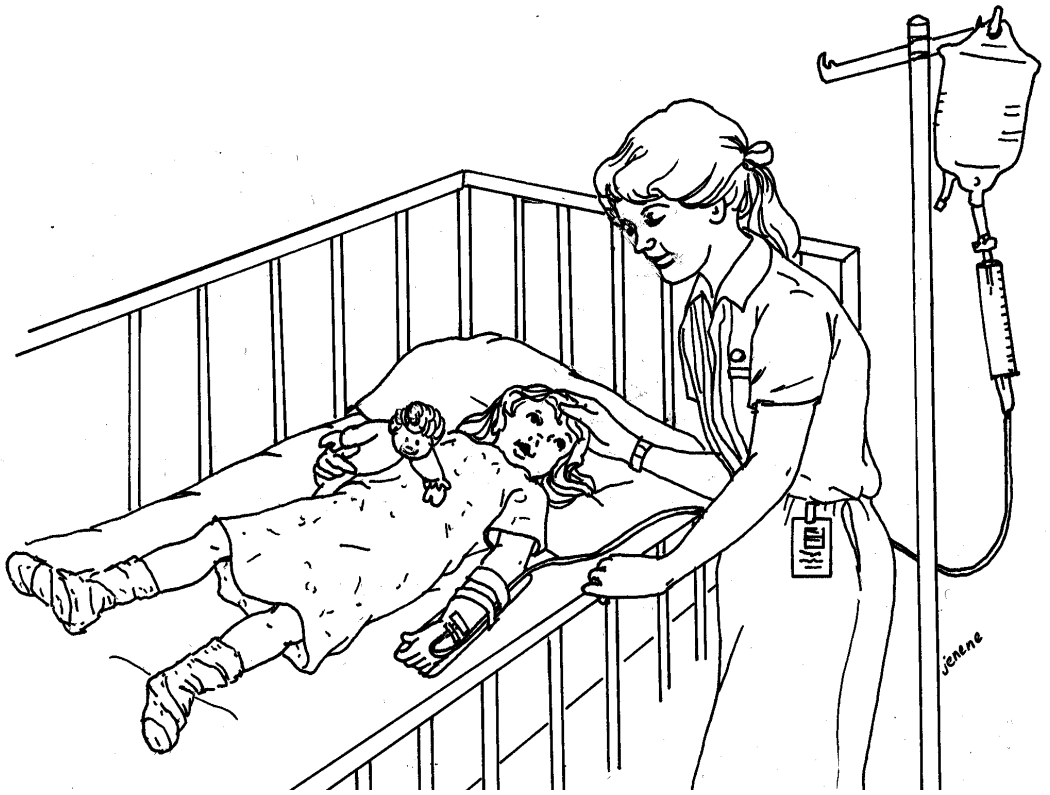
BURNS: SPLIT THICKNESS SKIN GRAFTS

Your child is scheduled for surgery to have a Split Thickness Skin Graft (S.T.S.G.). The S.T.S.G. is an operation that involves taking non-burned skin from one area of your child's body and transplanting it to his or her burn site. The area where the skin is obtained is called a *donor site* (usually the thigh or buttocks). The burn area which receives the skin is called the *graft site.*

WHAT TO EXPECT BEFORE SURGERY

- Skin grafts are done from 1 to 5 days after the burn injury, or after the burn is free of dead tissue called eschar (ES-kar).
- A wet-to-dry dressing will usually be done the morning of surgery.
- Your child will be given pain medicine before the wet-to-dry dressing is changed.
- Your child will not be allowed to have anything to eat or drink after midnight the night before surgery. This is done to prevent vomiting during anesthesia, which can be dangerous.
- About 1 hour before surgery, your child may be given medicine to make him or her sleepy.



Picture 1 Returning from surgery.

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DURING THE SURGERY

- When your child is asleep in surgery, the surgical team will remove the wet-to-dry dressing and re-wash the burn and donor site areas.
- An instrument called a Dermatone is used to shave a very thin layer of skin from the *donor site* (usually the thigh or buttocks).
- This thin layer of skin is sometimes placed in a machine which stretches it like a web. This skin is then attached with stitches or special staples to the child's burn area. This area then becomes the *graft site*.
- Both the donor site and graft site will be covered with a dressing before your child is returned to his room.
- Your child will have an I.V. (intravenous) so he can receive the needed fluids and medicines (Picture 1, page 1).

Picture 2 Heat lamp treatments help the donor site heal.

CARE OF THE DONOR SITE

- The dressing on the donor site is usually removed 24 hours after surgery. Only a single layer of special gauze is left on the site until it is dry and healed. Then it can be removed slowly by lifting it at the edges and trimming it with small scissors. Your child's nurse will remove the special gauze the first time and then show you how to remove it.
- A heat lamp may be used to dry the donor site (Picture 2). It will be directed at the donor site 4 to 6 times a day for 15 to 20 minutes while in the hospital.
- Instead an ointment called Bacitracin may be applied to the donor site 3 times a day to help in healing. The ointment also helps make the special gauze easier to remove when the donor site is healed.
- It takes between 7 to 14 days for the donor site to heal completely.

CARE OF THE GRAFT SITE

- The dressing on the graft site must be kept clean and dry for 3 to 5 days. It may be held in place with a splint.
- After this, the dressing on the graft site will be changed once a day until your child's burn is healed.
- The staples or stitches will be removed 7 to 10 days after surgery, if needed. This allows enough time for the graft site to heal.

WEARING A SPLINT

- When the graft is on an area which crosses a joint (such as the knuckles, elbows, knees, ankles, or toes), a splint (which is like a half-cast) is put on the grafted area over the dressing. This splint protects the skin graft from being bumped, pulled, or stretched.
- Your child's splint will be put on after surgery and will stay on over the graft dressing until the dressing is changed for the first time.
- The splint and dressing are left in place for 3 to 5 days to allow time for the new skin graft to attach itself to the burned area.
- Your child's doctor will decide how long your child will need to wear the splint after the dressing is removed.

NUTRITION AFTER SURGERY

- After surgery, when your child is allowed to eat, he will first be given clear liquids. Clear liquids include: ice, water, Jello, popsicles, 7-Up, and Hi-C.
- If your child has no problems keeping down clear liquids, he will be given regular foods.
- It is important for your child to eat healthy foods to help the graft site and donor site heal and to decrease the chance of developing an infection. Just as before surgery, your child should eat foods high in protein and calories (Picture 3). Encourage your child to eat nutritious foods rather than snack foods or candy.
- It is helpful to make a list of your child's favorite foods and give it to your nurse or dietician.

Picture 3 It is important to eat healthy foods to help the graft and donor sites heal.

ACTIVITY AFTER SURGERY

- If the graft site is on your child's leg or foot, standing and walking will not be allowed for a few days. Your child's doctor will decide when your child may have limited activity. If walking is limited or not allowed, your child will be put on a special "burn cart" so he may leave his room.
- If your child is allowed to sit in a regular chair, his legs will need to be propped up. This helps blood circulation and prevents swelling and discomfort.
- Quiet play may be allowed by the doctor. Your child should not take part in rough play until the sites have healed. The donor site should be covered with an Ace bandage before the child is up and about.
- Your child's doctor will tell you when your child may return to school.

FOLLOW-UP APPOINTMENT

It is very important that you keep your follow-up appointment. If you cannot keep the appointment, please call the clinic or your doctor.

If you have any questions, be sure to ask your doctor or nurse, or call the Burn Unit at (614) 722-4290 or _____.