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 moving it to his or her burn site. The area from which the skin is taken is called a **donor site** (usually the thigh or buttocks). The burn area that receives the skin is called the **graft site**.

**What to expect before surgery**

- Skin grafts may be done 1 to 5 days after the burn injury, or after the burn is free of dead tissue called eschar (ES kar).
- Your child will not be allowed to have anything to eat or drink after midnight the night before surgery. This is 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.

**During the surgery**

- When your child is asleep in surgery, the surgical team will remove the 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 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 may have an IV (intravenous line) so he can receive the needed fluids and medicines (Picture 1).

**Care of the donor site**

• After surgery, the donor site may be more uncomfortable than the original burn area. Pain medicine will be ordered to relieve this discomfort.

• The dressing on the donor site is usually removed 24 hours after surgery. A special sponge dressing covers the donor site and remains in place for seven days. After 7 days the special sponge will be removed and another may be placed if the donor site is not yet healed. On some occasions, the sponge dressing needs to be changed before seven days. An outer gauze dressing is changed daily.

• It usually 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 that 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 in or 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 or she will first be given clear liquids. Clear liquids include: ice, water, Jell-O, popsicles and 7-Up.
- 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 2). 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 dietitian.

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 your child’s activity.
- If your child is allowed to sit in a regular chair, his or her legs will need to be propped in a raised position. This helps blood circulation and prevents swelling and discomfort.
- Quiet play may be allowed. 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 around the room. Your child's doctor will tell you when he may return to school.

Follow-up appointment

It is very important that you keep your child’s 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 child’s doctor or nurse, or call the Burn Unit at (614) 722-9052 or ________________________.