

Caring for your child's spinal wound at home

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Wounds and how long they take to heal

After spinal surgery, your child will have a wound. The size of the wound depends on the type of surgery that your child had.

The wound should have started healing well by about 2 weeks after surgery. We expect wounds to be fully healed within 1 to 2 months. This is when all scabs have come off the entire wound, leaving no open areas.

Complete recovery can sometimes take up to a year. This is when the wound is:

- no longer raised or red (redness can be harder to see on brown and black skin)
- appears flat and no longer feels itchy
- blends in with the surrounding skin tone

General management plan

The plan to care for a wound is different for each individual. We give you and your child specific advice before you leave hospital.

As a general guide, spinal wounds are dressed (covered with protective material) for 14 days after surgery. Where possible, we use dissolvable stitches (sutures) that do not need to be removed.

Your child's wound then needs to be checked by:

- a healthcare professional at Evelina London
- the practice nurse at their GP surgery; or
- a community nurse at your home

Type of stitches

There are 3 types of stitches that can be used after spinal surgery:

- **Dissolvable stitches:** These do not need to be removed.
- **Non-dissolvable stitches:** The practice nurse at your child's GP surgery or community nurses need to remove these about 14 days after surgery.
- **Staples:** Community nurses need to remove these 14 days after surgery.

Monitoring your child's wound

It is important to monitor your child's wound for any changes. They could mean that there is an infection or complication.

If you notice any of the signs listed in this section, contact the spinal clinical nurse specialists immediately, **phone** 020 7188 7188 and then ask for bleep 0472, Monday to Friday, 8am to 6pm.

Out of hours, you can contact Savannah ward, **phone** 0208 1887188 extension 85941 or 89204.

Signs of infection

Your child's dressing will be clean and dry before you go home. You need to look at the wound regularly and check for any signs of infection. These include:

- redness, which may be harder to notice on brown and black skin

- open areas
- oozing
- a smell (odour)
- increasing pain and tenderness around the site
- your child having a high temperature

If you notice any of these signs, contact the spinal clinical nurse specialists or Savannah ward.

Washing and bathing after surgery

While your child has a dressing on their wound, you need to:

- keep it clean and dry
- avoid getting it wet

We recommend that your child only has sink or bowl washes until their wound check appointment about 14 days after surgery.

Your child can have a shower when:

- the wound site is clean and dry
- the dressing has been removed

It is better for your child to have a shower than a bath while the wound heals. This puts less strain on their back than getting in and out of the bath. It also allows water to run out of the wound.

Your child should not soak the wound site until it has healed completely. This means that they need to avoid having a bath and going swimming until then.

Managing your child's wound at home

If the surgical dressing starts peeling off and the wound could be exposed, you need to either:

- trim the dressing
- stick Tegaderm™ (a transparent medical dressing) on top of the area that has peeled off and cover the wound immediately with another dressing

We give you spare Tegaderm dressings when leaving hospital. You can use one of the dressings to reinforce your child's previous dressing if it starts peeling off.

It is important to check your child's wound site regularly and make sure that it is completely covered. You need to do this for at least the first 14 days before their wound check appointment with a GP practice nurse or community nurse. This appointment is booked before they leave hospital.

Please do not remove your child's dressing to check the wound. You should be able to see through the dressing.

We also give you a supply of dressings for your child's wound check appointment with the GP practice nurse or community nurse.

If you have any questions about wound dressings, please contact the spinal clinical nurse specialists directly. Their details are in the "Contact us" section at the end of this booklet.

Scar management

It is normal for your child to have a scar after surgery. If you follow our suggested routine, this can reduce the appearance of the scar. You can start the routine 3 to 4 months after your child's surgery and when the wound has fully healed.

There are 2 main steps to manage your child's scar:

1. Massage the area to help the scar stay flat and encourage blood flow here.
2. Use moisturiser on the area to add moisture and hydrate the skin again following a wound.

This gentle routine helps to:

- prevent the scar from binding to the tissues, which means that your child can keep moving freely and comfortably
- reduce redness and swelling
- encourage the scar to become smoother more quickly

Scar massage

Here are easy, manageable steps to massage your child's scar with just your hands for a few minutes a day:

- Massage the scar for 5 minutes, 5 times a day.
- For 2 of those sessions, massage the scar without cream.
- For the other 3 sessions, use a non-perfumed cream like Nivea®, Bio-Oil® or E45. These creams can help

to reduce dry skin and soften your child's scar for a better appearance. Avoid using creams that contain vitamin E at this early stage.

You need to keep to a routine to help make sure that your child's scar heals well.

Reducing your child's pain medicine

After leaving hospital, your child needs to take regular pain medicine (analgesia). This is a guide about how to start reducing their pain medicine.

Week 1

You can give your child:

- paracetamol 4 times a day (usually every 4 to 6 hours and no more than 4 doses in 24 hours)
- ibuprofen 3 times a day after food (usually every 6 to 8 hours and no more than 3 doses in 24 hours)
- dihydrocodeine 4 times a day but start cutting down the number of doses if you do not feel that your child needs it (leave 4 to 6 hours between doses when your child needs this medicine and give no more than 4 doses in 24 hours)

Week 2

You can:

- give your child paracetamol 4 times a day every 4 to 6 hours (as in week 1)
- start cutting down the number of ibuprofen doses if your child does not need it (leave 6 to 8 hours between doses when you do use this medicine and give no more than 3 doses in 24 hours)

- give your child dihydrocodeine if needed (leave 4 to 6 hours between doses and give no more than 4 doses in 24 hours).

Week 3

You can stop giving your child ibuprofen and dihydrocodeine completely, but continue with paracetamol when needed.

If paracetamol is not enough to control your child's pain, you can give them ibuprofen when needed (as in weeks 1 and 2).

If paracetamol and ibuprofen together are not enough to control your child's pain, you can use dihydrocodeine. However, you should only give your child this medicine if needed and its use should be limited now.

Please contact the spinal clinical nurse specialists if your child still needs regular pain medicine 4 weeks after leaving hospital.

Useful details

Child's name

Date of surgery

Date of leaving hospital

Consultant's name

Date of 6-week follow-up.....

[illegible]

Contact us

If you have any questions or concerns about your child's wound, please contact the spinal clinical nurse specialists, **phone:** 07770 825 902 or bleep 0472, Monday to Friday, 8am to 6pm. To bleep a nurse, call the hospital switchboard, **phone:** 020 7188 7188 and ask for the bleep desk. Ask for bleep 0472 and wait for a response. This connects you to the nurse directly.

Outside of these hours, please call Savannah ward, **phone:** 020 7188 5941.

For more information on conditions, procedures, treatments and services offered at our hospitals, please visit **web** www.evelinalondon.nhs.uk/leaflets

Evelina London medicines helpline

If you have any questions or concerns about your child's medicines, please speak to the staff caring for them or contact our helpline, **phone** 020 7188 3003, Monday to Friday, 10am to 5pm

Your comments and concerns

For advice, support or to raise a concern, contact our Patient Advice and Liaison Service (PALS), **phone** 020 7188 8801 **email** gstt.pals@nhs.net To make a complaint, contact the resolution department **phone** 020 7188 3514 **email** gstt.complaints@nhs.net

Language and accessible support services

If you need an interpreter or information about your child's care in a different language or format, please

contact the department where they have the appointment.

NHS 111

This service offers medical help and advice from fully trained advisers. They are supported by experienced nurses and paramedics. The service is available by phone 24 hours a day, **phone** 111 **web** www.111.nhs.uk (111 online is for people aged 5 or over, and you need to call 111 to get help for a child under 5)

NHS website

This website gives information and guidance on all aspects of health and healthcare. It can help you to take care of your child's health and wellbeing, **web** www.nhs.uk

Get involved and have your say: become a member of the Trust

Members of Guy's and St Thomas' NHS Foundation Trust contribute to the organisation voluntarily. We rely on them for feedback, local knowledge and support. Membership is free and you can decide how much to get involved. To find out more, please get in touch, **phone** 0800 731 0319 **email** gstt.members@nhs.net **web** www.guysandstthomas.nhs.uk/membership