

Your child's surgery to remove a skin growth or lump (lesion)

This leaflet is about your child's surgery to remove a skin growth or lump (lesion), which we arrange to be tested. It explains what you should do before your child's procedure, on the day of the procedure and when you return home.

Your child's condition and procedure

Why does my child need to have their skin lesion removed and tested?

Your child needs this procedure because they have a skin growth or lump called a lesion. This is an area of skin that is not growing normally or looks different from the surrounding skin.

Examples include:

- a mole (a small, dark coloured spot on the skin that often appears during childhood)
- a skin tag (a small, skin-coloured growth that hangs off the skin)
- a pilomatrixoma (a slow-growing skin tumour of the hair follicle)
- a pyogenic granuloma (a blood vessel tumour on the skin)
- a dermoid cyst (a collection of tissue under the skin, which may contain structures like hair, sweat glands, teeth, bone or nerves)
- an epidermoid cyst (a closed sac under the skin, or skin lump, filled with dead skin cells)
- a branchial cleft cyst (a small lump on the side of the neck or below the collarbone)
- a fistula (an abnormal opening or tunnel between 2 parts of the body or a part of the body and the skin)
- a dermatofibroma (an overgrowth of tissue in the deeper layer of the skin)

Many skin lesions are harmless, but can still be troublesome and affect the appearance of your child's skin. The aim of the procedure is to remove the lesion and send it to be tested in a laboratory. The laboratory can then check the tissue in detail under a microscope and make a diagnosis. After the procedure, the wound is closed and the skin heals.

Are there any other treatment options to this procedure?

If your child's skin lesion has not changed and does not cause problems, treatment can be delayed.

The standard treatment is to cut out a skin lesion completely if we need to test it in a laboratory. If your child's skin lesion does not need to be tested, there may be other options to surgery. Some skin lesions can be:

- treated with a skin lesion removal cream or gel
- gently scraped or scooped out using a spoon-like device (curettage)
- frozen with liquid nitrogen
- destroyed using heat, laser or light therapy

Your child's treatment depends on:

- what type of skin lesion they have
- the size and depth of the skin lesion
- where the skin lesion is on their body

We talk to you about the treatment options and which is likely to work best for your child.

Before your child's procedure

What needs to happen before my child's procedure?

We need to see your child at a pre-admission clinic. This clinic may take place face to face or online. We make sure that your child is ready for an anaesthetic, which is a medicine to make them sleep during the procedure, and surgery.

After the pre-admission clinic, our admissions team contacts you by letter, text message or phone. We offer you a date for your child's procedure.

Your child should not eat for 6 hours before the procedure. They can drink water until they arrive at the Evelina London children's day surgery unit. We give you more guidance about this (fasting instructions).

Do I need to get pain medicine ready for my child?

Please make sure that you have a week's supply of paracetamol (a painkiller) and ibuprofen (an anti-inflammatory medicine) at home before the procedure. We do not routinely give these medicines to take home for your child after day surgery.

You can buy paracetamol and ibuprofen from a pharmacy, supermarket or shop. Paracetamol for children may also be called Calpol®. Ibuprofen for children may also be called Calprofen® or Nurofen®. You need the type of medicine that you would give your child if they were unwell with a cold or ear ache. If your child cannot take paracetamol or ibuprofen for any reason, please speak to their healthcare team about other options.

On the day of the procedure

When you arrive at the children's day surgery unit

We give you a time to arrive at the Evelina London children's day surgery unit. It is important that you arrive at the correct time and have followed the fasting instructions for your child. If you arrive late or have not followed the fasting instructions, we may not be able to do the procedure.

You and your child meet the surgical and anaesthetic teams on the admissions ward before the procedure. We confirm that you have given your permission (consent) for the procedure. You can ask us any more questions that you may have.

During the procedure

We give your child a general anaesthetic. This is a medicine that makes your child sleep and stops them feeling any pain during the procedure. You can stay with your child until they are asleep. Please see our separate leaflet called "Your child's general anaesthetic" for details.

The surgeon examines the skin lesion, cleans the area and marks the piece of skin to be removed with special ink. They then cut out the whole skin lesion, lining and any tunnel,

connection or links under and over the skin. The surgeon also cuts out a small amount of normal tissue around the edge of the lesion.

After removing the skin lesion, the surgeon puts it in a container. We send this to a laboratory, which examines the growth in detail under a microscope.

The surgeon closes the wound with stitches, skin glue or both and covers it with a dressing. Depending on your child's specific procedure, their stitches may be dissolvable or need to be removed later. The surgeon explains this afterwards.

Are there any risks to my child's procedure?

Every procedure has some risks of complications. To reduce these risks, we make sure that your child is well at the time of the procedure. We talk to you about the risks in the clinic and before the procedure when we confirm that we have your consent.

The specific risks of a procedure to remove a skin lesion are:

- bleeding
- scarring or raised scars called keloids (your child has a permanent scar after the procedure, but it fades within a few weeks)
- changes in skin colour
- an infection that needs to be treated with antibiotics
- poor wound healing
- changes in skin sensation (feeling) if there is any nerve damage (this is usually temporary, but may continue in rare cases)
- the skin lesion returning (this is rare)

After your child's procedure

How will my child look and feel after their procedure?

Your child may feel drowsy after their surgery and sleep for a while. They may be restless (agitated) and upset for up to an hour after waking up from the procedure. Some children may have pain and feel or be sick (vomit), but this is not common.

During the procedure, we may give your child painkillers, fluids, anti-sickness medicines and a local anaesthetic. The local anaesthetic is medicine to make the area around the wound numb.

After the procedure, your child has a dressing on the wound where we have removed the skin lesion. They may have some temporary soreness, swelling or bruising at the wound site, but should not be in much discomfort.

Will my child be in pain after their procedure?

Your child usually has a local anaesthetic medicine during their procedure. This medicine gives them pain relief for several hours after they wake up.

When your child is awake, we may give them paracetamol, ibuprofen or both. You can continue to give your child these medicines as needed when they are at home. The nurses can guide you when the next amount (dose) of pain medicine is due.

When can my child eat and drink or feed after their procedure?

Your child should be able to eat and drink or feed as usual within 1 to 2 hours of the procedure.

Do we see the surgeon after my child's procedure?

Yes, the surgeon comes to check your child after their procedure. They update you about the surgery and answer any questions that you may have.

When can my child go home?

Your child can go home on the same day as their procedure when they:

- feel comfortable
- can manage (tolerate) their usual food and drink
- are not feeling sick (nausea) or being sick (vomiting)
- are behaving as they usually do

Please supervise your child carefully on the journey home. According to the sudden infant death syndrome (SIDS) guidelines, it is best to avoid long car journeys for babies under 1 year of age. If you travel home by car, it is important that:

- you stop for frequent breaks to feed your baby and change their position
- an adult sits with the baby in the back of the car

After you go home

How do I care for my child's wound after the procedure?

After the procedure, the surgeon or a member of their team gives you specific instructions about your child's wound and dressings. They explain how to look after your child's wound while it heals and what follow-up care you can expect.

Your child usually needs to wear dressings over the wound for 5 to 7 days. We then see them in the clinic for a wound check. Otherwise, you have a phone appointment and we look at photos of how the wound is healing.

If the dressings fall off before the first wound check, please follow this guidance:

- Use the extra dressings that we have given you or call the plastic surgery team for advice. You can find the contact details at the end of this leaflet.
- If you cannot dress the wound again and it is outside working hours, you may need to contact a GP or go to your nearest emergency department (A&E). They can then replace your child's dressings.

It is important to keep the area around your child's wound clean and dry until their first wound check. When your child has a bath or shower, be careful not to get the dressings wet.

We explain if your child's stitches are dissolvable or need to be removed. Please do not start gently massaging the scar area until we tell you that it is safe. This is usually 1 month after the procedure.

Finally, you need to take extra care to protect your child's skin from the sun while their wound heals. Try to avoid exposing the scar to the sun for at least 6 months after the procedure. You need to put a strong sunscreen on your child when they go outside. This is especially important if your child has any changes in skin colour after the procedure. The label of the sunscreen should have:

- a sun protection factor (SPF) of at least 50 to protect against UVB
- at least 4-star UVA protection

UVB and UVA are types of ultraviolet rays from the sun that can damage the skin.

How can I manage my child's pain after their procedure?

If your child appears to be in any pain at home, we recommend giving them paracetamol and ibuprofen. Please remember to buy these medicines before the day of your child's procedure. It is also important to make sure that your child drinks plenty of fluids.

It is safe to give the 2 medicines at the same time, ideally with food. This is easier to plan and the medicines work in different ways. You can give your child:

- 1 recommended amount (dose) of paracetamol every 4 to 6 hours and no more than 4 doses in 24 hours
- 1 dose of ibuprofen every 6 to 8 hours and no more than 3 doses in 24 hours

You may find the following chart helpful to keep track of your child's medicines.

Home medicine chart for parents

Medicine	Time to give	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
Paracetamol								
Ibuprofen								

Do I need to look for any symptoms after my child's procedure?

Contact a GP or the plastic surgery team if you feel that your child is unwell, or you notice:

- bleeding
- signs of infection, such as pain, severe swelling, hardening or thickening of the skin, redness that spreads on the skin, a bad smell from the wound and leaking yellow-green liquid called pus or watery fluid
- a high temperature (fever)
- your child is not eating or drinking well

On white skin, the area around the wound can appear red if it is infected. On brown or black skin, the area can appear red or purple but it may be more difficult to notice the redness. An infected wound site may feel warm or hot to touch on any skin colour.

If you are very concerned or notice these symptoms outside of working hours (Monday to Friday, 9am to 5pm), call 999 or go to A&E.

Do you see my child again after their procedure?

We may give you a date for a follow-up appointment while you are still in the children's day surgery unit. It is most likely that you will get a phone call from our team in the next few days.

A laboratory examines the skin lesion that we have removed and sends us the results. This usually takes about 2 weeks. We call you when the results are available.

Contact us

If you **cannot keep your appointment**, contact our admissions team, **phone** 020 7188 9098, **email** gst-tr.paediatricadmissions@nhs.net

If your child has a **cough, cold or high temperature** in the 2 weeks before the procedure, contact our pre-assessment team, **phone** 020 7188 7188 extension 58209

If you have any **concerns during working hours (Monday to Friday, 9am to 5pm)** about your child's surgery, call the paediatric plastic surgery clinical nurse specialist, **phone** 07747 204 489

If you have any **concerns outside working hours (Monday to Friday, 5pm to 9am or at the weekend)** about your child's surgery, contact the on-call plastic surgery doctor through the main switchboard, **phone** 020 7188 7188 and ask for bleep 0155

If you have any **concerns from 24 hours after surgery** about your child's health, contact your child's specialist surgical team or GP surgery, or **phone** NHS 111

If you are concerned that your child is **seriously unwell** at any time, go to your nearest A&E or **phone** 999

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



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