Surgical Wounds

Caring for an incision, and what to do if it opens or gets infected

What is a surgical wound?

A surgical wound is the incision a surgeon makes during an operation. Most heal without any trouble. Some do not, and that is when we get involved.

A surgical wound may be closed with stitches, staples, surgical glue, or adhesive strips, or it may be deliberately left open to heal from the bottom up. Some wounds that were closed later come apart, which is called dehiscence.

What normal healing looks like

- Mild redness right along the incision line for the first several days
- Some swelling and bruising that slowly fades
- Small amounts of clear or slightly pink fluid in the first 48 to 72 hours
- Soreness that gradually improves each day
- A firm ridge you can feel under the incision at about one week. This is healing tissue and is expected.
- Itching as the wound closes

Why some surgical wounds have trouble

- Infection at the surgical site
- Diabetes or high blood sugar
- Smoking, which sharply reduces oxygen delivery to the incision
- Poor nutrition or low protein
- Obesity, which puts tension on the incision and reduces blood supply to fatty tissue
- Steroids, chemotherapy, or medicines that suppress the immune system
- Fluid collecting under the incision (a seroma or hematoma)
- Strain from coughing, vomiting, straining, or lifting too soon
- Radiation to the area in the past

How we treat it

- **Assessing depth and involvement.** We determine whether the problem is at the skin only or extends into deeper layers, and we communicate directly with your surgeon.
- **Cleaning and debridement.** Dead tissue and old suture material are removed so the wound can close.
- **Packing open wounds correctly.** A wound that has opened must be filled loosely so it heals from the base upward and does not close over a pocket.
- **Negative pressure wound therapy.** A wound vacuum is often very effective for open abdominal, sternal, and orthopedic wounds.
- **Culture and antibiotics** when infection is present.
- **Supporting the whole person.** Blood sugar, nutrition, and smoking are addressed alongside the wound, because the wound will not close without them.

What you can do at home

- Wash your hands before and after touching your dressing, every time.
- Keep the incision clean and dry. Follow the specific bathing instructions we give you. Do not soak in a tub, hot tub, or pool until we clear you.
- Do not put ointments, powders, alcohol, hydrogen peroxide, or home remedies on the incision unless we tell you to.
- Support the incision with a folded towel or pillow when you cough, sneeze, or get up.
- Follow lifting restrictions exactly, even when you feel fine.
- Eat protein at every meal. Healing tissue is built from protein.
- Do not smoke or vape.
- Do not pick at scabs, adhesive strips, or glue. Let them come off on their own.

When to call us right away

- Redness spreading outward from the incision, or a red streak
- Increasing pain after the third or fourth day rather than steady improvement
- Thick, cloudy, yellow, green, or foul-smelling drainage
- The incision opening, separating, or gaping
- A sudden gush of fluid from the incision
- Fever above 100.4 F, chills, or feeling unwell
- Anything visible in the wound that should not be there