

## **APPENDIX B.**

### **Sample FAQ for patients undergoing reconstruction after skin cancer resection**

**1. How should I plan to manage discomfort and pain after the procedure?**

Your physician and you should create a pain management strategy on which you both can agree. The use of over-the-counter pain relievers such as acetaminophen and ibuprofen is encouraged. A few patients may occasionally use a narcotic pain medication, the potential risks should be outweighed with the inability for a non-narcotic pain medication to be adequate.

**2. Will I be taking oral antibiotics after my procedure?**

Typically, oral antibiotics will not be prescribed; however, your doctor may order antibiotics in some unique circumstances to mitigate the risk of infection.

**3. Should I continue to take my blood thinners around the time of the procedure?**

In most cases, the use of anti-clotting agents will not be discontinued (as discussed previously in recommendation 4) However, please consult with your primary care physician, cardiologist, and physician performing your reconstruction.

**4. What type of reconstruction is best for me?**

The surgical options for repair should be discussed with your physician with the risks, benefits and alternatives considered.

**5. When will I return for follow-up?**

Follow-up will vary depending on the use of permanent or absorbable suture materials as well as the protocol as based on your reconstructive team's standards.

**6. How can I prevent excessive swelling and bruising?**

Postoperative swelling around the surgical site as well as bruising will vary depending on the extent and location of your surgery. The use of ice is a possible option that you should discuss with your physician. Swelling may not resolve for weeks, with a final result from your procedure not being visible for months.

**7. When can I return to my normal daily activities?**

You should discuss your limitations in activity with your physician as your ultimate outcome may be affected in some situations by excessive activity or exercising.

**8. What is the typical timeline for sutures to be removed?**

Sutures are often removed in the postoperative visits generally ranging between 5-10 days after surgery; however, absorbable sutures may be used which would not require removal. Please consult with your physician regarding the management of the site of your reconstruction after surgery.

**9. When should I plan to return to work?**

It is important to discuss with your physician when you should be expected to return to work and when limitations of heavy lifting would be removed.