

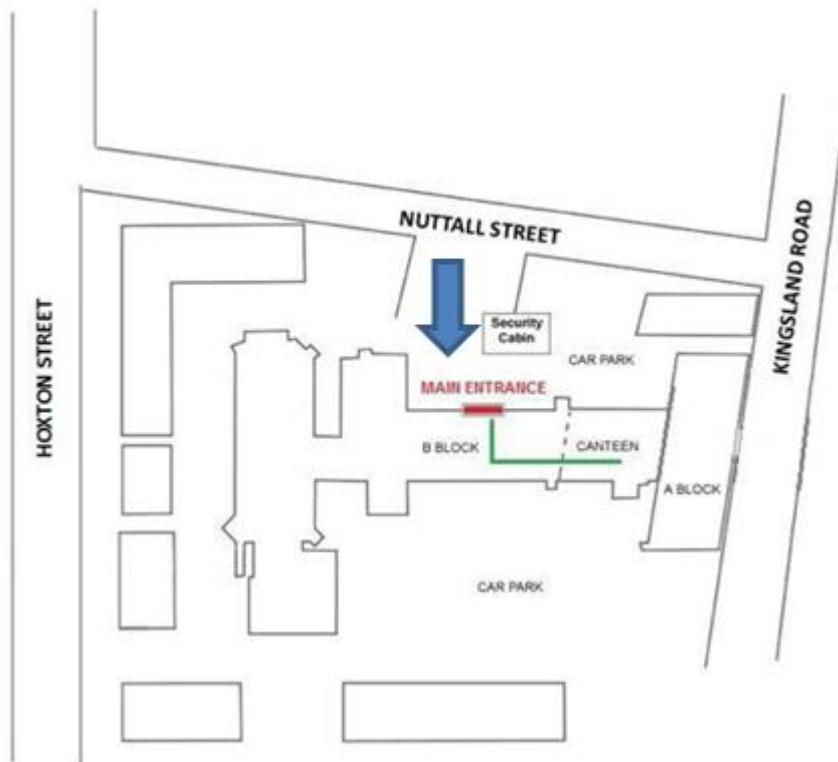
Minor Surgery Clinic – information for patients

Your doctor has referred you for a small operation (minor surgery) and you have been booked for an appointment with either Dr Semere or Dr Attree, who run the clinics.

Both are experienced GPs with a long-term specialist interest in Minor Surgery. See our staff page for more information [here](#)

How do I get to the Lawson Practice?

You can find us at 85 Nuttall Street, inside St Leonard's Hospital grounds:



Please think about the site and size of your lesion whilst making travel plans and consider that you are likely to have a small wound when you leave. It might be sensible to arrange a lift home, or avoid cycling etc.

What if I'm running late, or need to cancel?

The clinics usually run on time, so please arrive with a couple of minutes to spare before your appointment.

If you need to inform us that you are running late, or cancel on the day, please call the practice on **0203 538 6044**.

We will do our best to accommodate you if you're late, where this is not possible we will offer you a further appointment.

How should I prepare?

Please eat and drink as usual before your appointment. You should have a good breakfast or lunch before and not skip meals.

If you are taking medications please bring a list. If you are taking blood thinners please let us know, and if you are on warfarin please bring your Yellow Book and latest INR blood test result.

Wear comfortable clothing, ideally allowing us easy access to your problem area whilst keeping the rest of you clothed. You may have to lie flat and will need to lie still for the duration of the procedure.

You are welcome to bring **one** friend or family member but it's also fine to come alone if you prefer.

If you have a baby or small child we will do our best to accommodate them. It's helpful to bring a buggy or pushchair. There are baby change facilities at the practice and if you would like a quiet room to breastfeed please ask at reception.

You may want to bring some paracetamol or ibuprofen painkillers with you, to take after the procedure.

What will happen at my appointment?

The doctor will go through your details fully and assess whether your case is appropriate for minor surgery. You will usually have the procedure at the same appointment, on the same day.

Minor surgery is a relatively painless and fairly quick procedure which generally takes 10-30 minutes.

Most cases use local anaesthetic to numb the skin, then we remove your lesion and apply stitches or dressings, depending on the type of surgery you have had. Alternatively you may have a joint or soft tissue injection, or treatment for ganglion, and a plaster applied.

Am I eligible for NHS Minor Surgery?

There are rules about NHS funding for these procedures. Decisions are based on strict clinical criteria and so are usually clear-cut.

We do not recommend or fund NHS minor surgery where:

- there is little or no evidence the procedure is effective
- the procedure is only effective in certain circumstances
- the procedure is for cosmetic, rather than clinical reasons

Usually your usual GP will have checked that you are eligible before referring you. Sometimes they are not aware of the rules and after reviewing your case we are unable to carry out the surgery.

If this happens, we will explain and discuss your options, which sometimes include your choice to pay for treatment privately at a different clinic if you wish. We do not make any particular recommendations or referrals to private doctors.

Which problems can be treated?

We are able to treat many different problems including:

- non-cancerous moles
- skin tags
- cysts
- lipoma
- joint and soft tissue injections
- ganglion aspiration
- granulation tissue treatment
- diagnostic biopsy
- Dr Semere's clinics include minor eye and lip surgery

What if a procedure is not recommended for me?

Sometimes we are unable to continue with minor surgery, for instance if more tests are needed, surgery is inappropriate, or the lesion is infected.

Sometimes the site or size of the lesion means we cannot safely remove it in a minor procedure and you may be advised to return to your usual GP and discuss a referral to hospital specialists.

If this is the case we will fully discuss any follow-up plan with you and inform our GP of the outcome.

What will happen during my procedure?

The way we remove the lesion and close the wound will depend on the type of lesion you have. You may have stitches or may not need them and we will discuss your particular case with you before the surgery. **If you think you are prone to problematic scars please tell the doctor at your appointment.**

Most surgery procedures are carried out using local anaesthetic (an injection given around the site of the operation, similar to that used by Dentists, which does not put you to sleep). This will initially sting a little but this stops very quickly and then the area is numb. The local anaesthetic usually lasts around 2 hours.

Most joint and soft tissue injections, as well as ganglion aspirations are performed without any local anaesthetic beforehand.

If you have had a bad reaction to local anaesthetic in the past it is very important that you inform us.

What are the risks from my surgery?

Common / likely risks

- **Pain:** all surgery can cause pain and your doctor will discuss what to expect at your appointment
- **Bleeding and bruising:** there may be some bleeding and bruising after the surgery, particularly if you take aspirin or warfarin tablets or the surgery is around the eyes or nose. The bleeding should settle during or shortly after the surgery and bruising will take several days to resolve. Generally minor surgery procedures do not involve significant bleeding or bruising.

- **Scarring:** all surgery involving a cut to the skin will leave a scar. We make every effort to minimise this but cannot predict your outcome. Occasionally people get wider or more lumpy scars, called hypertrophic or keloid scars. This is more common with some darker skin tones and with surgery to particular areas (upper back, shoulder or chest).
- **Sensation:** there may be some loss of sensation to the area of skin involved. Normal sensation can take many months to return and occasionally reduced sensation may be permanent.
- **Infection:** any time we cut the skin or put a needle in, there is a small risk of infection. Usually this is less than 2 in 100 cases and we will discuss if we think your risk is higher due to other medical conditions or the site of the surgery.
- **Recurrence:** most of the lesions we remove can grow back and we will discuss with you possible outcomes at your appointment
- **Steroid injections:** Injections can cause skin and pigment changes locally which usually improve after a couple of months. They are not generally 100% effective and the doctor will discuss success rates at your appointment.

Rare risks

- **Excision surgery:** There is a rare risk of nerve injury leading to loss of motor nerve function such as eyebrow / eyelid and shoulder drop when surgery is deeper
- **Steroid injections:** these have a rare risk of deep soft tissue, or tendon infections, or tendon rupture, depending on where we are injecting. This is very rare, but can be serious and requires urgent medical attention.

What can I expect after my procedure?

Once the local anaesthetic wears off you may feel a little sore. The pain should respond well to regular paracetamol tablets.

You should take it easy after your operation and for the rest of the day however if you feel fine there is no reason why you cannot return to work.

If for any reason you see significant bleeding from the wound, apply firm pressure with a clean cloth or towel for 15-20 minutes and the bleeding should stop. If bleeding continues please contact your GP for advice.

We recommend you keep your wound clean and dry for at least a week, with no soaking baths or swimming. You can usually wash gently after the first 24-48h and pat dry, before applying a dressing if needed.

We will supply spare dressings if these are needed after the first few days. Sometimes a plaster is enough, or you can leave the wound open to the air if it is not rubbing on clothes etc.

It is best not to put too much stretch on a wound, for example with exercises or yoga, as this may pull the wound apart or make the scar wider.

If you think your wound gets infected, with red hot skin spreading around the wound, or any pus, please contact your GP for urgent advice and treatment. This usually responds well to tablet antibiotics.

Do I need to have stitches removed?

Depending on the procedure you may not have stitches or they may be dissolving ones. The doctor will explain which type you have in the wound.

Dissolving stitches – these do not need to be removed. They can take several weeks to fully dissolve and you may feel them under the skin during this time. They will eventually fade away as they are absorbed by the body.

Steri-strips- these are strips of sticky tape which hold the wound together. They will usually fall off after a few days. Occasionally they may need to be soaked in some cooled boiled water in order to remove at home. If you are having a dressing change with a health care provider they can remove them for you.

Non-dissolving stitches - these DO need to be removed and you will be told if you have these kind of stitches. Removal can be done at the Lawson Practice surgery and you will be given instructions when to arrange the appointment (usually 5-10 days after the surgery).

Scars

Any surgery will leave a scar. It takes at least a year for your scar to mature, so you will not know what the final scar looks like until after this time.

Typically scars start off slightly raised, and pink, then shrink down, flatten and become paler with time.

If you have concerns about your scar after your minor surgery, please allow time for the body to heal. If you remain concerned please discuss with your usual GP.