



Caring for myself after Melanoma Sentinel Lymph Node Biopsy (SLNB) and Wide Local Excision (WLE)

What are my general guidelines?

1. Drink plenty of fluids. Some of the pain medications can cause constipation, and drinking plenty of water will help prevent this. If you do get constipated, you may need a stool softener or laxative. Your pharmacist or we can help you with this.
2. You may resume light activity as you feel up to it.
 - Avoid any heavy lifting (heavier than a gallon of milk)
 - Avoid strenuous activity or excessive stretching with the involved arm or leg.
3. Do not drive for at least one week after the surgery. Your reflexes are slower than you think, and any pain from the incision is distracting. Also, you cannot drive while taking opioid pain medications because they will further slow your response time.

What pain can I expect after surgery?

It is normal to have some pain after surgery. The goal of managing your acute pain after surgery is to minimize your pain enough to feel comfortable getting up, taking deep breaths, wash, get dressed, and do simple tasks in your home. This means your pain is tolerable. Pain is usually the worst in the first 24-48 hours.

How will I care for my pain?

You will receive a prescription for a strong pain medication (painkiller) that contains opioids (strong pain medicines, also called “narcotics”) for **break-through pain**. Break-through pain means pain that is not controlled by Around-

Surgical Oncology

The-Clock acetaminophen and ibuprofen. Use the opioid only if you have break-through pain. Most patients have stopped taking the medication by 1-2 days after surgery. Alternating over-the-counter medications such as acetaminophen (Tylenol®) or ibuprofen (Motrin®, Advil®), maybe all you need to control your pain.

How will I use medications to relieve pain?

- Take acetaminophen (Tylenol®) 500-1000mg 4 times per day. The Maximum daily dose for an adult is 4000mg per day.
- Take ibuprofen (Motrin® or Advil®) 400-800mg 3 to 4 times per day. The maximum daily dose for an adult is 3200mg per day. Take ibuprofen with food to avoid an upset stomach.

If your pain is not controlled with over-the-counter medications, take only as much of the prescription painkiller as you need. Start with 1/2 of a pill.

- As your pain goes down start taking less of the prescription painkiller and use Tylenol®, Advil®, or Motrin® instead. This is called “tapering off”.
- Do not drink alcohol or drive while taking narcotic pain medication.
- Opioids may cause constipation. If you get constipated, you may need to take a stool softener or laxative. Your pharmacist or we can advise you on this.

Use the diary in the appendix to keep track of the amount of pain medications you are taking.

For your safety and the safety of others follow these instructions:

- Store opioids in a locked cabinet, out of reach of children.
- Do not keep leftover pain medications after your pain is gone. Safely dispose of pain medications you no longer need. You can find a map of locations to dispose of leftover medication at: <https://michigan-open.org/safe-opioid-disposal/disposal-map/>

How will I care for the incision sites?

1. Leave your outer dressings on for at least 48 hours.
2. At the site of the sentinel lymph node biopsy, the sutures are underneath the skin and will not need to be removed.
 - Over the incision is a skin sealant (Indermil). This will dissolve over the next few weeks.
 - There may be a dressing over this that can be removed at 48 hours.
 - At the site of the melanoma, resection are Nylon sutures that will need to be removed in the office at 2 to 3 weeks.
3. After 48 hours you may remove the outer dressings and shower. For the first week avoid running water directly on the incision, and pat it dry with a clean towel. After the first week, you may begin cleansing your incision with soap and water. Keep a clean dressing over the site of the melanoma resection.
4. Do not apply any creams or ointments to the incisions. If the incision is underneath the arm, do not use antiperspirant or shave under that arm.
5. You may notice some clear light yellow fluid seeping from the skin at the site of the sentinel node biopsy. This is known as a “seroma,” and is generally not anything to be concerned about.

When should I watch for?

Watch for signs of infection including:

- increase in the swelling or redness near the area of the surgery
- the skin around the incision becomes hot to the touch.
- thick green or yellow drainage from the wound which may be pus
- bad smell around the wound
- fever over 101°F
- increasing pain

Call the clinic if you have any signs of infection. See the contact information below.

What is my follow-up care?

We need to see you back in the office in approximately 2 to 3 weeks so that we may see that you are recovering well and remove your sutures. Call your surgeon in 7 to 10 days for the pathology report. Depending on that report, we may recommend additional surgery, a referral to another doctor (such as a medical oncologist), or routine follow-up. We will make these arrangements when we know the final pathology. If you have not heard from our office regarding your pathology after 10 days, call the office to check on your results. The contact information is below.

Remember that healing from surgery takes time. If you have any questions about your procedure, your follow-up instructions, or plan of care, do not hesitate to call the Surgical Oncology Nurse Practitioner.

What is the contact information for Surgical Oncology?

- During business hours Monday-Friday 9-4:30 pm call the Surgical Oncology clinic at (734) 936-6000.
- For urgent calls after 4:30 pm, weekends and holidays, ask the operator to page the surgical oncology on-call resident at **(734) 936-6267**.

Disclaimer: This document contains information and/or instructional materials developed by Michigan Medicine for the typical patient with your condition. It may include links to online content that was not created by Michigan Medicine and for which Michigan Medicine does not assume responsibility. It does not replace medical advice from your health care provider because your experience may differ from that of the typical patient. Talk to your health care provider if you have any questions about this document, your condition or your treatment plan.

Plain Language Editor: Ruti Volk, MSI, AHIP

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Appendix: diary to record the amount of pain medications you are taking. (copy the table for additional days)

Day 1				
Time	Name of Medication	Amount of Opioid (in mg)	Amount of Acetaminophen (in mg)	Amount of Ibuprofen (in mg)
AM PM				
AM PM				
AM PM				
AM PM				
AM PM				
AM PM				
AM PM				
AM PM				
AM PM				
AM PM				
AM PM				
Total Daily				

Day 2				
Time	Name of Medication	Amount of Opioid (in mg)	Amount of Acetaminophen (in mg)	Amount of Ibuprofen (in mg)
AM PM				
AM PM				
AM PM				
AM PM				
AM PM				
AM PM				
AM PM				
AM PM				
AM PM				
AM PM				
AM PM				
Total Daily				

Day 3				
Time	Name of Medication	Amount of Opioid (in mg)	Amount of Acetaminophen (in mg)	Amount of Ibuprofen (in mg)
AM PM				
AM PM				
AM PM				
AM PM				
AM PM				
AM PM				
AM PM				
AM PM				
AM PM				
AM PM				
AM PM				
Total Daily				

Day 4				
Time	Name of Medication	Amount of Opioid (in mg)	Amount of Acetaminophen (in mg)	Amount of Ibuprofen (in mg)
AM PM				
AM PM				
AM PM				
AM PM				
AM PM				
AM PM				
AM PM				
AM PM				
AM PM				
AM PM				
AM PM				
Total Daily				