Aspirin and aspirin-related products, such as those listed below, SHOULD NOT be taken 5 days before OR after surgery, due to the increased risk of bleeding.

For this reason, it is very important that you know the contents of any “over the counter preparations” prior to their use. Many headache preparations, cold remedies, and “hangover cures” contain aspirin. The chemical name of aspirin is acetylsalicylic acid.

Examples of drugs containing salicylates are as follows:

<table>
<thead>
<tr>
<th>Acetidine</th>
<th>Bufferin</th>
<th>Inhiston</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alka-Seltzer</td>
<td>Cobicidin</td>
<td>Liquiprin</td>
</tr>
<tr>
<td>Anacin</td>
<td>Dronon Compound</td>
<td>Midol</td>
</tr>
<tr>
<td>Analist</td>
<td>Doan’s Pills</td>
<td>Pepto-Bismol</td>
</tr>
<tr>
<td>APC</td>
<td>Distin</td>
<td>Persisitin</td>
</tr>
<tr>
<td>Aspergum</td>
<td>Ecotrin</td>
<td>Sal-Sayne</td>
</tr>
<tr>
<td>Aspirin</td>
<td>Empirin Compound</td>
<td>Stanback</td>
</tr>
<tr>
<td>B C</td>
<td>Excedrin</td>
<td>Theracin</td>
</tr>
<tr>
<td>Bromo-Quinine</td>
<td>4-Way Cold Tablets</td>
<td>Trigesic</td>
</tr>
<tr>
<td>Bromo-Seltzer</td>
<td>Goody Powder</td>
<td></td>
</tr>
</tbody>
</table>

Examples of aspirin-related products are the following: (These products also should not be taken 2 weeks before or after surgery).

<table>
<thead>
<tr>
<th>Advil</th>
<th>Naprosyn</th>
<th>Indocin</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alleve</td>
<td>Motrin</td>
<td>Tolectin</td>
</tr>
<tr>
<td>Nuprin</td>
<td>Ibuprofen</td>
<td>Feldene</td>
</tr>
</tbody>
</table>

You can substitute TYLENOL for these products for pain or fever leading up to surgery. Your physician will give you a prescribed pain medicine and antibiotic to take after surgery upon discharge from the hospital.

Check with your PHARMACIST if you are not sure if the medication you are taking contains aspirin.

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POST-OPERATIVE INSTRUCTIONS
SKIN CANCER TREATMENT CARE

Patient’s Name: ________________________________

Procedures: [ ] Biopsy [ ] Cryosurgery
[ ] Surgical excision

Post-op Date: ________________________
POST-OPERATIVE INSTRUCTIONS

Cryosurgery

What Is It?
Skin cryosurgery (kri-o-sir-jer-e) is freezing of the skin with a very cold liquid gas called liquid nitrogen. The liquid nitrogen freezes the water in your skin. This makes the abnormal skin cells die within 30 minutes. Cryosurgery is usually done to get rid of growths on the skin. These growths may be warts, non-cancer growths, and some kinds of pre-skin cancer.

Treatment
There are 2 ways to freeze the skin. A large cotton-tipped swab is dipped in liquid nitrogen. It is then put on the growth until it is frozen and destroyed. Or, liquid nitrogen is sprayed on the skin until the skin freezes or dies. You may feel stinging or burning pain as the skin thaws. It usually hurts the most at about 3 to 10 minutes after the skin is frozen.
The treated skin becomes red and swollen shortly after this is done. A blister blood or fluid in it forms over the area within 2 or 3 days. The blister will break by itself in about 3 to 10 days and may leave a scab. This scab usually falls off after 2 weeks. Do not pick at the scab or try to remove it. You should have little or no scarring after the area is totally healed.

Care
The most important part of your care is to keep the treated skin clean. This will help keep it for becoming infected. Your caregiver may or may not want the blisters to be covered with a bandage. Do not open the blisters unless your caregiver tells you to. The frozen growth will fall off on its own in about 2 weeks. Be sure not to pick at the scab. Do not put any medicine, creams, or lotions on the area.

- Do not pick the scabs or blisters, you will develop scarring
- Keep the area clean
- Call your caregiver if the blister becomes painful

Biopsy or Surgical Excision

What Is It?
Surgical excision is used to treat all types of skin cancer. Given an experienced surgeon and a small, well-placed tumor – it offers results that are both medically and cosmetically excellent.

Treatment
The physician begins by outlining the tumor with a marking pen. A "safety margin" of healthy-looking tissue will be included, because it is not possible to determine with the naked eye how far microscopic strands of tumor may have extended. The extended line of excision is drawn, so the skin may be sewn back together.

The physician will administer a local anesthetic, and then cut along the lines that were drawn. The entire procedure takes about thirty minutes for smaller lesions.

Wounds heal rapidly, usually in a week or two. Scarring depends on many factors, including the placement of the tumor and the patient's care of the wound after the procedure.

Care
The most important part of your care is to keep the treated skin clean. This will help keep it for becoming infected. You may clean the area with peroxide and apply an antibiotic ointment like Neosporin to the wound twice daily. From time to time, your physician may decide to treat you with an oral antibiotic.

- Do not pick the scabs or blisters, you will develop scarring
- Keep the area clean
- Call your caregiver if the blister becomes painful