About Your Split-Thickness Skin Graft

This information describes surgery using a split-thickness skin graft.

In a split-thickness skin graft, your surgeon removes a thin layer of skin from 1 part of your body (donor site) and uses it to close the surgical site that needs to be covered (recipient site). You may have a split-thickness skin graft if you lost a large area of skin due to an infection, burn, or surgery.

About Your Donor Site

Your donor site will be chosen based on the size of the area that needs to be covered. Your surgeon will show you the area that may be used as a donor site. Common sites are the upper thigh and buttock. Your surgeon will talk with you about your donor site during your clinic visit before your surgery.

After your surgery, your donor site will look raw and red. You may have some discomfort or pain in the area for 1 to 2 weeks.

Your donor site will be covered with 1 of the following during your surgery:

- Xeroform® (sterile wound dressing) and a dry gauze
• Kaltostat® (a padded off-white dressing) under Tegaderm™ (a clear dressing)

Your nurse will change your dressing every 2 to 3 days after your surgery.

About Your Recipient Site

After your surgery, your recipient site may be covered with a pressure dressing or a wound VAC system.

Pressure dressing
The pressure dressing will help your recipient site heal properly. It may be held with silk sutures (stitches), a splint, cast, or sling. This will keep your graft from moving.

Your surgeon or nurse will remove the pressure dressing about 5 to 7 days after your surgery. After the pressure dressing is removed, your recipient site will be covered with a Xeroform dressing.

If you have a cast, your surgeon will cut out the area of the cast above your recipient site. This will help them look at your graft. The entire cast will be removed 10 days after your surgery, unless you had other surgeries. If you had other surgeries, you may have to keep the cast on longer. An Ace® bandage or tape will be used to hold your Xeroform dressing in place after your cast is removed.

You may be instructed to change your Xeroform dressing once a day until your graft has completely healed. Your nurse will
teach you and your caregiver how to change the dressing.

**Wound VAC system**

Instead of a pressure dressing, your surgeon may choose to use a wound VAC system on your recipient site. A wound VAC is a special dressing that applies suction to your wound to improve healing.

It will be removed 5 to 7 days after your surgery. Your surgeon will then examine your graft to make sure it has fully healed. If it hasn’t, you may need to keep your wound VAC dressing on longer.

**Caring for Your Sites**

One week after your surgery, your surgeon will check to see if your donor site has healed. If it has, it will be let open to air. If not, a new Kaltostat and Tegaderm dressing will be applied.

**Before your dressing is removed**

- Leave the dressing on your donor and recipient sites, unless your surgeon tells you to change it. Make sure to keep the dressing dry.
- If you have a Xeroform dressing, trim and remove the dressing as it loosens. It may take several days for the dressing to loosen.
- Don’t shower or take a bath until your surgeon tells you it’s okay. This will be based on how fast your sites are healing.
- You may take sponge baths but do not get your recipient
Your donor site. If you do, you can place dry gauze over the dressing on the donor site.

After your dressing is removed

- While you’re at home, keep the sites open to the air as much as possible. When you go out, apply dry nonstick gauze over the sites, if needed.
- Don’t rub the sites until they have completely healed.
- Avoid exposing the sites to the sun. Apply a PABA- free sunscreen with an SPF of 30 or higher to the sites, once they have healed.
- After your donor and recipient sites have healed, apply a thick layer of A & D® ointment or other moisturizer to the area. Do this once a day after showering.
- At first, your recipient and donor sites will look dark pink in color. This color will change and become lighter over several months. Once your sites have completely healed, you can use makeup to cover them.

Call Your Doctor or Nurse if You Have:

- A temperature of 101°F (38.3°C) or higher
- Shaking chills
- A thick yellow (pus-like) drainage from your donor or recipient site
• Drainage from your donor or recipient site that smells bad
• New or increased redness or warmth around your donor or recipient site
• New tenderness around your donor or recipient site

If you have any questions, contact a member of your healthcare team directly. If you're a patient at MSK and you need to reach a provider after 5:00 PM, during the weekend, or on a holiday, call 212-639-2000.

For more resources, visit www.mskcc.org/pe to search our virtual library.