

Dressings following nail surgery

Information for patients and carers

Podiatry Service

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What happens after nail surgery

You will be seen for a review after toenail surgery to make sure that your toe is healing properly. The appointment is usually within a few days of the surgery. Then you will continue to dress the toe yourself until your toe has healed, following the instructions given to you by the Podiatrist. Guidance is also given in this leaflet.

Your Podiatrist will advise if you need further reviews. Extra appointments may be needed if your toe is infected or becomes a problem.

Healing usually takes five to seven weeks if you have had a piece of nail removed from one or both sides of your nail. Healing will take longer if the whole nail has been removed, because there is a larger area of skin to be repaired. In this case healing can take around 8-10 weeks. Remember that the healing times will vary for each person or even each toe, because everyone is different and also due to health conditions. The figures listed in this leaflet are to be used as guidance only.

Please do not do any sport e.g. swimming, football, dancing, rugby, athletics, extended walks/hiking, gym work etc. until your toe has healed completely. Do not get your toe wet in the bath or shower; the only time your toe should get wet is when you are doing your salt water soak as part of the dressing change.

If you are concerned about your toe, or if you are not sure how to do the dressings, please contact your Podiatrist for help.

Podiatry Department

Telephone: 01942 483483

Textphone: 18001 01942 483483

Items you will need

You will need the following items to be able to dress your toe. These can be ordered from the chemist or via an online shopping site or supplier of podiatry goods:

1. Low-adherent dressings 5cm x 5cm e.g. MELOLIN or TELFA or MELOLITE or SOLVALINE or SKINTACT

Any brand of sterile dressings may be used if they are named as non- or low-adherent. Please **do not** use gauze or lint, or dressings with adhesive tape on them.

2. Tubular “finger” bandage.

If you have had more than one nail operated on, or a full nail removed, it is often cheaper to order a full 20 metre roll of bandage:

e.g. TUBEGAUZE, SIZE 01, CODE NUMBER 2424 or TUBINETTE, SIZE 01, CODE NUMBER 2416

These are available from online shopping sites and Podiatry suppliers. You can use a search engine (e.g. Google, Bing) to find similar low- adherent dressings and tubular bandage products.

3. Plaster/adhesive tape.

Any sort of tape can be used to keep the dressing on, by securing the bandage at the bottom of the toe, e.g. MICROPORE or MEFIX.

Please do not apply tape all around the toe otherwise the tape may cut into your toe or it may reduce the blood supply to your toe.

Redressing procedure

Once you start to redress your toe you must change the dressing **every 2-3 days** following the instructions given. Change the dressing more frequently if there is a lot of weeping from your toe and the dressing is getting soggy, stained or smelly. You must change the dressing as soon as possible if the dressing gets wet, if it comes off or is uncomfortable.

You must keep your toe dry when having a bath or shower, so that there is less risk of infection. If you do not follow the written advice, or that given by the Podiatrist, your toe may become worse and may need further surgery.

- Remove the old dressing. If the dressing has stuck to your toe, pour a little salt water on the dressing and allow it to soak through for a few minutes. This will soften the dressing to help you to remove it without tearing your skin or disturbing the wound.
- Soak your toe in a saline footbath for 5 minutes. (See below for advice.)
- Dry your foot but not the nail operation site.
- Apply a new dressing immediately: start with the Melolin (or similar) dressing, shiny/film side of the dressing against the toe to reduce the risk of the dressing sticking to your toe. **DO NOT** put any creams, ointments, liquids etc. on your toe. Do not allow the wound to air-dry before applying the dressing.
- Put tubular/finger bandage over the dressing, and a piece of plaster/tape to secure the bandage at the bottom of the toe.

Saline footbath:

Put some lukewarm water in the bowl and add salt to the water. Use one tablespoonful of salt to a pint (500ml) of water. Do not soak your toe for longer than 5 minutes.

It is wise to thoroughly clean the bowl or bowls, both before and after they have been used for the footbath.

Points to remember

Do not wrap the tape tightly around your toe as it could cut off your circulation. If you put tape around the dressing or over the nail area there is a greater risk of infection as it could make your skin “soggy”. Instead, if the dressing seems to move around, put a little piece of tape at one side of the dressing to keep it in place.

Healing

The way your toe will heal is similar to your skin healing after a cut, scratch, graze or burn. There may be some bleeding to begin with.

Then there will be a little “weeping” of pale yellow, watery tissue fluid. The area will continue to discharge tissue fluid for some weeks – this is a normal part of the healing process. The wound begins to heal with a crusty scab. The area will continue to dry up, and eventually the scab will fall off when the skin has healed. Do not pick or remove the scab as you may cause trauma to the area and delay the healing process; it could also introduce infection.

Your toe may be red or swollen around the site of the surgery, and some days this will be worse than on other days. This is because more blood is sent to the area to repair the damage that has occurred. This is normal – it is the way your body heals.

If the redness becomes worse, starts to travel further down your toe, or if you have increased pain or discharge from your toe, please contact Podiatry department immediately. In the evenings or at weekends you should consult your own doctor, Out of hours GP or visit the Walk in Centre or contact NHS Direct for advice, then contact the Podiatry department as soon as possible afterwards for a review.

Useful Information

Please continue to do your dressings for a further two dressings after there has been no more weeping from your toe and there has been no staining on your dressing. A scab will usually have formed at this stage. Do not try to remove the scab. You can then stop doing the dressings and salt footbaths.

Should you have any cause for concern or any other queries please telephone

01942 483483

Textphone18001 01942 483483

Local Pharmacy - Your local pharmacies offer a wide range of services including information and general advice on symptom relief medicines as well as a prescription collection and delivery service.

For impartial and confidential advice or information on the services provided by Bridgewater or to receive this leaflet in an alternative format call our Patient Services team on: 0800 587 0562.

Please use this space to write notes or reminders.

Comments, Compliments or Complaints

The Patient Relations/Patient Advice and Liaison Service (PALS) Department provides confidential on the spot advice, information and support to patients, relatives, friends and carers.

Contact Us

Tel: 01942 822376 (Monday to Friday 9am to 4pm)

The Patient Relations/PALS Manager
Wrightington, Wigan and Leigh Teaching Hospitals NHS Foundation Trust
Royal Albert Edward Infirmary
Wigan Lane
Wigan WN1 2NN

Ask 3 Questions

Become more involved in decisions about your healthcare. You may be asked to make choices about your treatment. To begin with, try to make sure you get the answers to three key questions:

1. What are my options?
2. What are the pros and cons of each option for me?
3. How do I get support to help me make a decision that is right for me?



How We Use Your Information

For details on how we collect, use and store the information we hold about you, please take a look at our “how we use your information” leaflet which can be found on the Trust website: https://www.wwl.nhs.uk/patient_information/leaflets/

This leaflet is also available in audio, large print, Braille and other languages upon request. For more information please ask in the department/ward.

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Call 111 first when it's less urgent than 999.



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Text: 81212
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