** LYMPH NODE BIOPSY**

 **DISCHARGE INSTRUCTIONS**

**FOLLOW UP CARE**

* A small amount of swelling is expected
* Skin will be tender at the incision site
* Keep your head elevated on 2 pillows while sleeping or resting, to help minimize swelling
* If a follow up appointment was not made the day of surgery, please call the office to make one

**OPERATIVE SITE**

* If skin glue was used to close your incision (shiny plastic like coating) no wound care is required
* If sutures close your incision, clean the incision with hydrogen peroxide and apply Bacitracin ointment twice a day

**ACTIVITY**

* Do not drive for 24 hours or while taking narcotic pain medication
* Smoking impairs healing and should be avoided

**DIET**

* Resume previous diet as tolerated

**MEDICATIONS**

* Prescription (s) will be sent with you. Use as directed.
* See PAIN CONTROL sheet for additional instructions.

**PROBLEMS TO WATCH FOR**

* Fever over 101.4
* Uncontrolled Nausea/Vomiting
* Increased swelling, redness, or drainage at the incision site

**Call your doctor with ANY problems that concern you:** Phone # (843) **766-7103**. If you need immediate attention, go to the nearest Emergency Department.

**I have read, been read, and verbally repeated back instructions and understand them. A copy has been given to me.**

**Date of Follow-Up Visit \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**Patient/Responsible Party Nurse Signature**