# Information on **Incision and Drainage of Abscess**

#### Introduction

Abscess is formed when bacteria infect blocked sweat glands. Commonly, they are found in the pubic region, around a hair follicle or tooth. It can also form anywhere on the body.

## The Operation

The surgeon will cleanse the skin with antiseptic, inject local anaesthetic.

The surgeon will make a cut on the abscess and drain out the pus, or use needle to aspirate the pus. After the pus has drained, the wound will be cleaned and rinsed with saline solution. Depending on the condition of the wound, suturing or insertion of drain may be considered. The wound may be packed with dressing material or laid open.

#### **Preoperative preparation**

- 1. Admit 1 day before or on same day of this "elective" operation.
- Anaesthetic assessment. **Inform your doctors** about drug allergy, regular medications or other medical conditions.
- 3. Empty bladder and change to operation clothes before transfer to the operation room.
- 4. Pre-medication, antibiotic prophylaxis and intravenous line may be required.
- 5. Fasting time: General Anaesthesia / Monitored Anaesthetic Care: 6-8 hour before operation
  - Intravenous Sedation: 4 hour before operation
  - · Local Anaesthesia: No need to fast

### **Postoperative Instruction**

General

- 1. Mild discomfort or pain over the operation site. Inform nurse or doctor if pain severe.
- 2. Inform nurses if more analgesics are required.
- 3. Can mobilize and get out of bed 6 hours after the operation.
- 4. Usually go home on day 2 after the operation.

- **Wound care** 1. Clear wound as prescribed by the surgeon.
  - 2. No need to have stitches removed if absorbable stitches are used, otherwise attending General Out-patient Clinic for stitches removal as instructed.

**Activities** 

- 1. Resume normal activities gradually depending on the operative site.
- 2. Sick leave certificate will be given as necessary.

**Diet** 

- 1. General Anaesthesia/Monitored Anaesthetic Care: 4 hours after operation, if sips of water tolerated well.
- 2. Intravenous Sedation: 2 hours after operation, if sips of water tolerated well.
- 3. Local Anaesthesia: Immediately after operation.

# **Common Risks and Complications** (not all possible complications are listed)

#### Anesthesia related complications

- Cardiovascular: myocardial infarction or ischaemia, stroke, deep vein thrombosis, pulmonary embolism, etc. (only applicable for patient under General Anaesthesia)
- 2. Respiratory: atelectasis, pneumonia, asthmatic attack, exacerbation of chronic obstructive airway disease. (only applicable for patient under General Anaesthesia)
- 3. Allergic reaction and shock.

### **Procedure related complications**

- Wound pain / Infection / Bleeding
- 2. Recurrence

#### Things to take note on discharge

- 1. Contact your doctor or a nearby Accident & Emergency Department if you find increase pain or redness around the wound and discharge from the wound.
- 2. Take analgesics prescribed by your doctor if required.

This is general information only and the list of complications is not exhaustive. Other unforeseen complications may occasionally occur. In special patient groups, the actual risk may be different. For further information please contact your doctor. Evangel Hospital reserves the right to amend this leaflet without prior notice. We welcome suggestions or enquiries on the information provided in this leaflet. Please contact our Healthcare professionals so that we could follow up and make improvement.

Verywell health: "Incision and Drainage Procedure to Treat Abscesses" (2022) https://www.verywell.com/iandd-incision-and-drainage-1069335 (12-07-2023)