

Introduction

Cauterization is burning body tissue to remove or close off a part of it. It is use to stop bleeding, close amputation and removal of undesirable tissue. The most common types are electrosurgery and curettage, and chemical cautery.

The Procedure

- 1. The operation can be performed under local or general anaesthesia.
- 2. Electrosurgery and Curettage

The tissue is burned with an electrical current and cut with a sharp knife or a small spoon-shaped tool.

Chemical cautery

Use chemical reaction to destroy body tissue. Most commonly used for removal of warts or necrotized tissue or hemostasis. Doctor would use a silver nitrate pen to press onto the tissue to be cauterized.

Preoperative Preparation

- 1. Admit 1 day before or on same day of this "elective" operation.
- 2. Anaesthetic assessment. Inform your doctors about drug allergy, your regular medications or other medical conditions.
- 3. Keep fast for 6 to 8 hours before operation.
- 4. Empty bladder and change to operation clothes before transfer to operating room.
- 5. Pre-medication, intravenous line and antibiotic prophylaxis may be required.

Postoperative Instruction

General

- 1. Mild throat discomfort or pain because of intubation.
- 2. Mild discomfort or pain over the operation site. Inform nurse or doctor if pain severe.
- 3. Nausea or vomiting are common; inform nurses if symptoms severe.
- 4. Inform nurses if more analgesics are required.
- 5. Can mobilize and get out of bed 6 hours after operation.

Wound care You should keep the wound dry.

Diet

Resume diet usually 4 hours after anaesthesia when taking sips of water well.

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

- Anesthesia related 1. Cardiovascular: myocardial infarction or ischaemia, stroke, deep vein thrombosis, pulmonary embolism, etc.
 - 2. Respiratory: atelectasis, pneumonia, asthmatic attack, exacerbation of chronic obstructive airway disease.
 - 3. Allergic reaction and shock.

Procedure related

- 1. Infection
- 2. Burns
- 3. Wound bleeding

Things to take note on discharge

- 1. Contact your doctor or a nearby Accident & Emergency Department if you find increasing pain or redness around the wound and discharge from the wound
- Take analgesics prescribed by your doctor if required.
- 3. T The wound must be kept clean to prevent infection. The wound may be covered with a sterile dressing to protect it for a few days.
- 4. A soft scab will form over the treated area. It will drop off by itself and leave a small scar.
- 5. Wound bleeding may be occurred during the first 24 hours. It can be controlled by applying gentle pressure to the area for 10 minutes.
- 6. Any follow-up consultations should be attended as scheduled.

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.

Reference

Article Sources and Contributors: www.frankshospitalworkshop.com/equipment/documents/electrosurgery/wikipedia/cauterization.pdf (13-07-2023)

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