

Sometimes, despite correct management, the skin may not be able to fully recover at the wound site. In these cases, your GP may refer you to see a plastic surgeon in case a skin graft is required

**Further sources of information**

NHS Choices: [www.nhs.uk/conditions](http://www.nhs.uk/conditions)  
Our website: [www.sfh-tr.nhs.uk](http://www.sfh-tr.nhs.uk)

**Patient Experience Team (PET)**

PET is available to help with any of your compliments, concerns or complaints, and will ensure a prompt and efficient service.

**King's Mill Hospital:** 01623 672222

**Newark Hospital:** 01636 685692

**Email:** [sfh-tr.PET@nhs.net](mailto:sfh-tr.PET@nhs.net)

If you would like this information in an alternative format, for example large print or easy read, or if you need help with communicating with us, for example because you use British Sign Language, please let us know. You can call the Patient Experience Team on 01623 672222 or email [sfh-tr.PET@nhs.net](mailto:sfh-tr.PET@nhs.net). This document is intended for information purposes only and should not replace advice that your relevant health professional would give you. External websites may be referred to in specific cases. Any external websites are provided for your information and convenience. We cannot accept responsibility for the information found on them. If you require a full list of references (if relevant) for this leaflet, please email [sfh-tr.patientinformation@nhs.net](mailto:sfh-tr.patientinformation@nhs.net) or telephone 01623 622515, extension 6927.

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**INFORMATION FOR PATIENTS****Pretibial (shin) lacerations****Emergency Department****King's Mill Hospital**

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A pretibial laceration is a type of cut which is usually caused by knocking your leg on something and because the skin is thin it tears, often in a 'V' shaped cut.

The cut on your leg needs special care and can take two months, or possibly even longer, to heal.

### **Treatment**

Because the skin is thin, we do not use stitches to close the wound, as this would damage the skin further. Instead, we use paper stitches called Steristrips. A single tubigrip stocking, knee to toe, will then be applied.

To ensure that the cut will heal as quickly as possible, it is important to maintain a good blood supply to the wound and prevent swelling.

This is the function of the tubigrip stocking. The stocking must stay in place until your next dressing is carried out and should not be removed at night.

### **Advice:**

- Rest your leg as much as you can, placing your foot on a stool higher than your hip if possible.
- Every hour, exercise your foot in an up-and-down and in-and-out movement. If possible, carry out these movements for five minutes every hour.
- Do not stand for long periods.
- Take tablets such as ibuprofen or paracetamol (both available from chemists) to relieve the pain, as advised by your doctor.

- Avoid getting the tubigrip stocking wet.
- Avoid removing the tubigrip stocking if you can, until it has been reviewed by your GP practice nurse.

### **Further management**

Blood supply to the lower leg is generally quite weak and so it can take some time for your wound to heal.

Regularly visit your GP practice nurse for dressing changes and wound care advice.

Sometimes blood collects under this wound. This blood will slowly disappear after a few days or weeks. Sometimes it moves down the leg with gravity – this is not unusual and does not mean you have a new injury. Keeping your leg elevated when sitting down will help reduce any ankle swelling.