Skin Grafts

What is a skin graft?
A skin graft is a surgical procedure performed in the operating room by a surgeon who is specially trained in the care of burns. It is a procedure, which involves placing skin over a wound that will not heal by itself. The graft skin is usually your own, but occasionally skin from the Skin Bank is used.

How is it done?
- Skin grafting is a two step process. It begins with the removal of burned skin (Eschar) from the burned area. Once the eschar is removed, the burned area is ready to receive a graft.
- The graft is made by removing a thin layer of skin from an unburned area of the body. This is usually from the thigh or buttock.
- This thin layer of skin is sometimes “meshed” giving it the appearance of a honeycomb.
- Meshed skin is used to allow a wound to drain, and/or to cover a larger burned area with a smaller donor area.
- The skin graft is held in place with several small staples and a large, soft, bulky dressing.
- If a joint is burned, for example, a hand, knee, or foot, a splint may be made by the physical or occupational therapists. The splint will be applied to the joint to keep it from bending.

How are grafts cared for?
- The large, bulky dressing will be changed three to five days after the operation.
- During this time, the patient may need to stay in bed.
- Staying in bed minimizes any movement around the grafted area. This allows the graft to “take” (stick) to the cleaned burn wound.
- Dressing changes begin on the third or fifth day. Your doctor will decide when this will occur.
- The dressings, staples, and splints will be removed by your nurse. The graft will be washed and checked for signs of infection.
- The dressings and splints are then reapplied and changed daily.
For information about donor sites read: “Instructions for caring for your donor sites”

If you have questions please call the Burn Center at (212) 746-5317 or the Burn Clinic at (212) 746-5024.

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