When to seek help

- Go to your GP or return to the Emergency Department if:
  - your leg bleeds a lot, making the bandage very wet;
  - your toes become very swollen;
  - you have any other symptoms causing you concern.

General support

- For general medical advice please use the NHS website, the NHS 111 service, walk-in-centres, or your GP.
- NHS website provides online health information and guidance www.nhs.uk
- NHS 111 phone line offers medical help and advice from trained advisers supported by nurses and paramedics. Available 24 hours a day. Calls are free from landlines and mobile phones.
- There are walk-in and urgent treatment services at Brighton Station, in Crawley and at Lewes Victoria Hospital. www.bsuh.nhs.uk/services/ae/
- Patient Advice and Liaison Service (PALS) can be contacted with your comments and concerns, and to provide general support. PALS@bsuh.nhs.uk
  - RSCH: 01273 664683
  - PRH: 01444 448678
  - PALS, Royal Sussex County Hospital, Eastern Road, Brighton BN2 5BE

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Disclaimer: The information in this leaflet is for guidance purposes only and is in no way intended to replace professional clinical advice by a qualified practitioner.

Ref number: 893
Publication Date: June 2018
Review Date: June 2020

Pretibial (shin) lacerations
Advice for patients

Emergency Department
Royal Sussex County Hospital
Level 5, Thomas Kemp Tower, Eastern Road, Brighton BN2 5BE
01273 696955 extn. 64261

Princess Royal Hospital
Lewes Road, Haywards Heath RH16 4EX
01444 448745

www.bsuh.nhs.uk
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.

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.

1. Rest your leg as much as you can, placing your foot on a stool higher than your hip if possible.
2. Every hour, exercise your foot in an up-and-down and in-and-out movement. If possible, carry out these movements for 5 minutes every hour.
3. Do not stand for long periods.
4. Take tablets such as Ibuprofen or Paracetamol (both available from chemists) to relieve the pain, as advised by your doctor.
5. Avoid getting the tubigrip stocking wet.
6. Avoid removing the tubigrip stocking if you can, until it has been reviewed by your GP practice nurse.

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.

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.