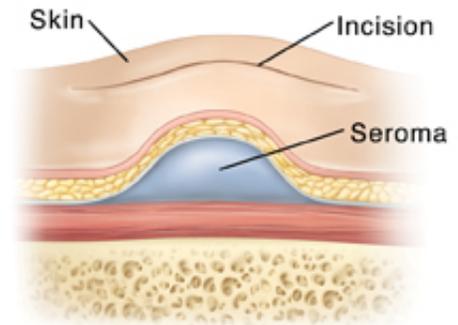


Postsurgical Seroma

A seroma is a sterile collection of fluid under the skin, usually at the site of a surgical incision. Fluid builds up under the skin where tissue was removed. It may form soon after your surgery. Or it may form up to about 1 to 2 weeks after surgery. It may look like a swollen lump and feel tender or sore.



A small seroma is not dangerous. Depending on its size and symptoms, it may not need to be treated. The seroma may go away on its own within a few weeks or months. Your body slowly absorbs the fluid. No medicine will make it go away faster. But if you have a large seroma or it is causing pain, your health care provider may drain it. This is done with a syringe and needle. Seromas can return and may need to be drained multiple times. Rarely, a minor procedure may need to be done to remove the seroma. Long-term problems from a seroma are rare. Most go away on their own.

Home care

You may be given medicines to relieve pain. These may include acetaminophen and ibuprofen. Take these as directed. Check the seroma daily for the signs of infection listed below.

Follow-up care

Follow up with your health care provider, or as advised.

When to seek medical advice

Call your health care provider right away if you have signs of infection:

- Fever of 1010.4°F (38°C) or higher, or as directed by your health care provider
- Seroma or skin around it feels warm
- Pain in the seroma that gets worse
- Redness or swelling that gets worse

Also call your provider right away if any of these occur:

- Drainage from the seroma that is white or colored or very bloody. Clear or slightly bloody drainage is normal.
- Wound opens up
- Rapid heart rate
- Shortness of breath