

After Surgery

Will I need to come back?

Usually one or two return visits are needed to examine the healed surgical site or to remove the stitches. Afterwards, you may return to your referring physician for routine check-ups. If you live far away, we may be able to arrange follow-up with your referring physician.

A follow-up period of 5 years for the treated cancer or abnormal growth is essential. After having one skin cancer or abnormal growth, statistics show that you have a higher chance of developing a second skin cancer or abnormal growth. You should have your skin checked by your referring physician at least once each year, not only to examine the treated skin cancer or abnormal growth, but also to check for new skin cancers or abnormal growths.

How can I protect myself from developing more skin cancers or abnormal growths?

The best protection from skin cancer or abnormal growths is to avoid the harmful ultraviolet rays of the sun. Even if you tan easily, the sun can contribute to skin cancer or abnormal growths. Sunlight damages the genes that control cell growth. Sunlight also impairs the body's immune system, allowing early cancers or abnormal growths to grow unchecked.

Minimize your exposure:

- Use a **sunscreen — any brand — with a sun protection factor (SPF) of at least 15** when you spend any time in the sun. **Areas exposed daily to the sunlight (such as face, ears, neck, forearms, and hands) should be protected every day** because these areas accumulate much more sun damage than do areas only occasionally exposed. Use a **waterproof** sunscreen if you are swimming or perspiring.

- If possible, avoid sun exposure during mid-day hours (10 a.m. to 4 p.m.).

- Do not assume that you are “not getting any sun” on cloudy days — most harmful ultraviolet (UV) light penetrates easily through the clouds.

For more information visit our website at www.georgiadermsurgery.com

MOHS SURGERY

An Informative Guide for Patients

GEORGIA DERMATOLOGIC SURGERY CENTERS, PC

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Your appointment:

Name: _____

Date: _____

Time: _____

**THIS GUIDE CONTAINS IMPORTANT
INFORMATION. PLEASE READ CAREFULLY.**

MOHS SURGERY: *an informative guide for patients*

What is Mohs Surgery?

Mohs surgery is a highly specialized treatment for the total removal of skin cancer and other abnormal skin growths such as atypical or “dysplastic” nevi or moles, atypical melanocytic neoplasms, premelanomas and Spitz nevi. Mohs surgery is named in honor of Dr. Frederic Mohs, the physician who developed the technique. This method differs from all other methods of treating skin cancer and other abnormal skin growths by the use of complete microscopic examination of all of the tissues removed surgically as well as the detailed mapping techniques to allow the surgeon to remove every abnormal cell.

What are the advantages of Mohs surgery?

By using detailed mapping techniques and complete microscopic control, the Mohs surgeon can pinpoint areas involved with abnormal cells that are otherwise invisible to the naked eye. Therefore, even the smallest microscopic roots of the cancer or the abnormal growth can be removed. The results are: 1) the removal of as little normal skin as possible; and 2) the highest possibility for curing the cancer or abnormal growth.

What are my chances of cure?

Using Mohs surgery, the percentage of cure is more than 99% for many skin cancers and abnormal growths, even when other forms of treatment have failed. Other methods of treatment may offer only a 50% chance of success if previous treatments have failed.

Will I be hospitalized?

No. Mohs surgery is performed in a pleasant outpatient surgical suite and you may return home the same day. Hospital facilities are available but rarely necessary.

What happens the day of surgery?

Our staff will escort you into a surgical suite where the surgeon will numb the area around the skin cancer or abnormal growth. Once it is numb, the visible

cancer or abnormal growth and a thin layer of tissue will be removed. This tissue is carefully mapped and coded by the surgeon and then sent for overnight processing in an outside laboratory. You will have a dressing placed over the wound and you will be free to return home until your appointment the following day. The surgical procedure on the first day takes only 10-15 minutes. However, your diagnosis makes it necessary for us to process the tissue removed over a period of 12-14 hours. You will be required to return the next morning to find out the results of the lab work. At that time, we will know whether there are any “roots” left and if we have to take an additional layer. The removal process will continue each day until clear margins are achieved. Once the margins around the cancer or abnormal growth are clear, we will be able to do whatever is necessary to aid in healing. Therefore, you will need to plan on at least two (and possibly more) visits on sequential days for complete removal of this lesion.

Will the surgery leave a scar?

Yes. Any form of treatment will leave a scar. However, because Mohs surgery removes as little normal tissue as possible, scarring is minimized. Immediately after the cancer or abnormal growth is removed, we may choose:

- 1) to leave the wound to heal itself
- 2) to repair the wound with stitches
- 3) to reconstruct the area with a skin graft or flap. The decision is based on the safest method that will provide the best cosmetic result.

Will I have pain after the surgery?

If there is any discomfort, Tylenol is often all that is necessary for relief. A prescription for a stronger pain medication will be written if necessary.

Will I have a bandage?

Yes. Most patients can expect some sort of bandage for a week. We will provide detailed wound care instructions.

Will my insurance cover the cost?

We accept assignment on Medicare policies. We will also submit a claim to any other insurance company for you. Expenses not covered include insurance deductibles, coinsurance and co-pay amounts. Please remember that your insurance is a contract between you and your insurance company, and some plans may have limited benefits (e.g. hospitalization-only coverage). Please check with your insurance company to see if pre-authorization is required.

We would not want anyone to be denied necessary medical care because of an inability to pay. If you have difficulties understanding or paying your bill, we encourage you to discuss your problem with the business office staff.

Preparing For Surgery

Medications: One to two weeks before surgery: stop taking any aspirin or over the counter pain medication products except Tylenol (acetaminophen). Aspirin and other products such as ibuprofen (Advil) act as blood thinners and increase bleeding.

Also discontinue ANY vitamin or herbal supplements as certain products will increase bleeding or bruising. Vitamin E, Ginkgo, garlic and other products have been shown to increase the risk of bleeding complications. Discontinue supplements 1 to 2 weeks before surgery.

If you are taking blood thinners (Coumadin): We would like for you to discontinue your Coumadin a few days before surgery, but **please check with your prescribing physician first.**

Continue any other medications prescribed by your doctor.

Avoid alcoholic beverages for 24 hours before surgery because alcohol can increase bleeding.

Stop smoking! Smoking will increase your risk of complications from surgery. Smoking can also interfere with normal wound healing and we want you to recover as quickly as possible.

Scheduling

You will be seen for a consultation before your surgery. Some insurance plans and Medicare will allow your consultation to be performed on the same day as your surgery.

Transportation: If you feel that you may be anxious during your procedure, we can provide you with a medication to help you relax. If you are given a relaxant, however, you will not be allowed to drive yourself home. We encourage you to bring a companion along, or to have someone available to pick you up after surgery. If someone does come with you to your appointment, **please restrict yourself to 1 or 2 companions, as we have limited seating in the waiting room.**

The Morning of Surgery

Breakfast: eat your normal breakfast.

Please do not wear makeup, nail polish, or jewelry if it will cover the surgical site. (Women with cancer or abnormal growth anywhere on the face, ear or neck should not wear makeup the day of surgery.) Also avoid using moisturizers on the surgical area the day of surgery.

Take your usual medications except any blood thinners, herbs, or vitamins as mentioned above.

Be prompt: Plan to arrive 15 minutes early if you have not already filled out our medical history form prior to your surgery.