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Patient Name: _____ Appointment: _____

Mohs Micrographic Surgery Information (Mohs Surgery)

You are awaiting a state-of-the-art skin cancer removal procedure called Mohs Micrographic Surgery. First done in the 1930's by Frederick Mohs, M.D., at the University of Wisconsin to remove complicated skin cancers, today's Mohs surgeons are trained during a special fellowship. In addition to the Mohs Surgeon, who also serves as pathologist, a certified histotechnologist will process the tissue specimens.

You have been referred for Mohs Surgery to provide this specialized treatment. Dr. Coven specializes in Mohs Surgery and performs this Mohs Surgery in our office.

Several effective methods are available for the treatment of skin cancer. The treatment choice is dependent on several factors, including size, treatment location, and tumor type. Mohs Surgery is indicated for basal and squamous cell skin cancers and provides the highest cure rate for both primary (first time) cancers and recurrent cancers (those cancers that reappear).

Mohs Surgery is a complex procedure combining surgical excision with immediate microscopic examination of the entire tissue specimen. This is done in five steps:

1. Numbing the skin with a local anesthetic.
2. Surgical removal of a thin, bowl shaped layer of skin containing the tumor.
3. Dividing the specimen into slices that are numbered, mapped, color coded, sectioned, and stained in our lab, using dedicated, specialized equipment for this task.
4. Examination by the Mohs Surgeon of each section under a microscope to determine if the entire tumor has been removed.
5. If there is any remaining tumor, the above steps 1-4 are repeated until the entire tumor is removed. Once it has been determined that the tumor has been removed completely, the skin defect may be repaired.

The Mohs Surgery technique allows us to examine 100% of the surgical margin and, if tumor is still present, pinpoint the precise location of the leftover cancer. This allows us to selectively remove another layer of skin from only the area where the cancer is remaining. This minimizes the amount of normal skin removed. Because some skin cancers are complicated, multiple stages of removal may be necessary. Examination of each stage can take up to 60 minutes. If multiple stages are taken, the Mohs procedure can take up a good part of a day, so you must reserve the entire day for this surgery.

HOW TO PREPARE FOR YOUR SURGERY

- You may take all of your routine medications. Please refrain from taking NSAIDs (ibuprofen, Motrin, Advil, Aleve) or vitamin E during the 10 days prior to surgery. If in doubt, please call.
- Avoid alcohol for 3 days prior to surgery and 3 days after surgery.
- Do not apply perfume or cologne on the day of surgery.
- You may want to bring some reading material to help pass the time.
- Please have a friend or relative accompany you home after surgery. Having someone to talk to may make the time pass more quickly. Also, driving during the first few hours after surgery is discouraged since a bulky dressing at the surgery site may obscure your vision or impair mobility.

- Eat a normal breakfast or lunch on the day of the surgery. You may bring your own lunch or snacks. A refrigerator is available for your use.
- Wear comfortable clothing. Be sure your shirt buttons in the front and is not worn by slipping it over your head. Do not wear a one-piece outfit.
- Take a shower and wash your hair on the morning of your surgery. Do not apply makeup if your surgery will be performed on your face.
- Do not schedule any important social events or out-of-town trips for two weeks after surgery.
- We recommend no exercise or heavy lifting for one to two weeks after the surgery. It will be important for you to rest and take it easy.

WHAT TO EXPECT THE DAY OF SURGERY

Please be prepared to WAIT! Mohs Surgery is a complex process, and due to its nature and the nature of surgery, unexpected “delays” and “adjusting” are commonplace. We appreciate your understanding.

After you arrive in the office and are checked in, you will be taken to our surgical suite where the Mohs procedure will be performed. Feel free to ask questions and let us know if there is anything we can do to make you feel more comfortable.

First, Dr. Coven will use a small needle to inject a local anesthetic to numb the entire tumor area. If additional injections are needed later, they are usually painless.

After the area is numb, Dr. Coven will remove a thin layer of skin affected by the cancer. This is called Stage 1 and represents the topmost layer of skin and is mapped, divided, and color coded. The wound is bandaged.

During the next 30 minutes or so, Dr. Coven and the histotechnologist are busy processing the tissue and examining the stained tissue sections with the microscope.

If the microscopic examination shows that there is still skin cancer to be removed, Dr. Coven will repeat the procedure. Additional tissue is removed only from those areas still affected by skin cancer.

Further stages are removed until all the cancer is gone. Two or three stages are commonly taken.

Once the skin cancer has been completely removed the defect may be repaired. This repair will be performed either by Dr. Hassan, a Board Certified Plastic Surgeon, or by Dr. Coven, the Mohs Surgeon. Usually the wound can be closed in a linear fashion with stitches. This converts the circular hole in the skin into a straight line scar. In other cases, a more complex procedure known as a flap or graft may be required, or the hole may be left open to heal by itself. The decision will depend on the wound size, depth and location. Dr. Coven or Dr. Hassan will discuss this with you once the cancer is fully removed. If stitches are used, they are typically removed in our office one to two weeks later. Note: Dr. Coven participates in all insurance plans accepted by Dr. Basuk. If Dr. Hassan is to perform your closure, billing for his procedure will take place from his office. If he does not participate in your insurance plan, his office should contact you prior to the day of surgery. If you would like to speak to his office about this, call 516-678-4451.

If the cancer is on the face, it is advisable to keep your head elevated while sleeping or resting, using an extra pillow or two for one to two weeks after the surgery to reduce swelling. Sometimes, if the cancer is anywhere near the eye, you may get one or two “black eyes” after the procedure, the worst bruising expected about three days after the procedure. No additional treatment is necessary; cold compresses may be helpful.

Although in most cases, the wound looks well after the stitches are removed, it may take weeks to months of careful wound care to tend to the scar site. Therefore, we ask that you be certain not to plan any important social events or out-of-town trips for two weeks following the scheduled surgery.