MOHS SURGERY INFORMATION

Dear Patient:

Mohs Micrographic Surgery is a special advanced procedure developed by Dr. Frederick Mohs at the University of Wisconsin in the 1930s. This treatment is usually reserved for various skin cancers: tumors which are difficult to treat because of the location, tissue type, size or if they recur despite previous treatment. Using this procedure, the surgeon is able to track all of the small extensions of the tumor and remove the tumor completely, sparing all normal tissue.

The day of the surgery, a local anesthesia will be used: you will be awake during the procedure. (If necessary, a mild sedative may be prescribed prior to the surgery date.)

Mohs surgery is done in stages. During each stage a thin layer of tissue is removed and brought into our in-office laboratory; the wound is lightly dressed and you are permitted to return to the waiting room. The tissue is prepared and examined under the microscope. At this point, the Mohs surgeon is able to tell precisely if residual tumor exists and if additional surgery is necessary. The first stage may take as long as an hour, which includes the time in the waiting room, until the laboratory results are available.

If a skin graft, flap or other plastic surgery is thought to be necessary, it will be done that day in our office or you will be asked to return on another day for repair. Sometimes you may be referred to a nearby experienced reconstructive plastic surgeon.

On the day of surgery please take all of your regularly prescribed medications. Also, please provide us with a list of your current medications. A good breakfast/lunch should be consumed prior to visiting the office. It is recommended that you dress comfortably (low shoes vs. stocking and high heels: jogging suit vs. business suit).

Please bring a family member or close companion – it may be necessary for them to change your dressing, drive you home, or just keep you company! If you enjoy reading, knitting, etc, - bring it along.

After the surgery, an appointment will be made at the front desk for wound assessment and management. Follow-up visits will be scheduled as needed. Although Mohs surgery has a cure rate of 97-99%, a small number of patients have recurrences; therefore, it is recommended that you keep all follow-up visits.

Eduard Raklyar MD, FAAD