

#### INSTRUCTIONS – PREPARING FOR MOHS MICROGRAPHIC SURGERY

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You have a skin tumor that needs removal, and you and your provider have elected MOHS surgery to remove this skin tumor. This step-wise removal of your tumor is performed under local anesthesia, and may require several stages to ensure complete removal of the tumor. While you wait, the doctor will examine the excised skin tissue under a microscope in order to verify that all cancerous skin cells have been completely removed.

#### STARTING TWO WEEKS BEFORE YOUR SURGERY

- 1. Continue to take your regular medications
- VERY IMPORTANT: If you have a history of heart disease, blood clots, or stroke, you are to CONTINUE your blood thinners. \*DO NOT STOP\*
- If you take Coumadin or Warfarin please contact our office. Patients on Coumadin or Warfarin should have their levels (INR) checked by their regular provider within five days of your surgery. Please ask the provider performing the INR to fax the results to our office at (919) 401 – 1924.
- If you do **NOT** have a history of heart disease, irregular heart beat, blood clots, or stroke, please avoid all blood-thinning agents such as aspirin, ibuprofen (Advil or Motrin), naproxen (Aleve), fish oil, krill oil and some medications for arthritis (please call with any questions regarding medications to avoid).
- 2. Tell us about antibiotics. If you have artificial joints, artificial heart valves, or if you have been advised to take antibiotics before surgery, call our office (prior to the day of your surgical appointment).
- 3. Tell us about allergies and pacemaker/defibrillators. Please notify the surgeon's office (prior to the day of your surgical appointment) if any of the following applies to you.
- You are allergic to any medications.
- You are sensitive to latex.
- You have a pacemaker, defibrillator,
- 4. Clear your calendar for your surgery day. Do not schedule any other appointments to fall on the same day as your surgery. For additional details, see below.

#### ON THE DAY OF YOUR SURGERY

- 1. Take your regularly prescribed medications. You should also eat breakfast before coming into the office, unless you have been instructed by another physician to not eat prior to surgical appointments. During your appointment a family member or friend may drive to a nearby restaurant to get you something to eat. It is our policy that a patient should not leave the immediate area of the office. The reason for this is that if you were to experience heavy bleeding or discomfort of the surgical site at a nearby restaurant, medical attention would not be immediately available. Another alternative is to bring a packed lunch or snacks from home.
- 2. Please wear comfortable clothing, do not wear a pullover shirt. If you are having surgery on your scalp, face, or neck, then wear a shirt that you are not required to pull over your head to remove.
- 3. Do not wear cosmetics or contact lenses.
- **4. Bring a sweater and/or blanket (optional).** The office temperature is typically kept cool, so you might want to bring a sweater, light jacket, or blanket.
- 5. Plan to spend the entire day at our office. Your plans for the rest of the day should be minimized. Many patients are discharged home within several hours; however, the occasional patient does need to stay in the office until later in the afternoon. My staff and I realize how stressful your waiting can be, and we will do everything in our power to make your wait as brief as possible. Please realize, however, that a medical office is not a place to rush unnecessarily. Your patience will be rewarded with medical care of the highest standard. A selection of magazines is provided in the waiting room, and we encourage you to bring your own reading materials. There is not a television in the waiting room or the surgery room. There is wireless internet access available, if you would like to bring such a device to your appointment. Please ask our front desk for the wireless internet code when you arrive.
- 6. It is much less stressful if you have no pending appointments or obligations on the day of your surgery. This will minimize any stress or worry of needing to leave the office by a certain time.
- 7. In the vast majority of cases, you will be medically able to drive home; however, we recommend that you bring a driver. If the surgery site is near your eye, or any other location that would interfere with safe driving practices, we do request that you bring a driver.
- 8. Bringing a companion can significantly minimize the psychological stress of the day. The experience of waiting in the office can be dramatically improved if you bring a companion. A friend or relative is not medically necessary, but a familiar face certainly minimizes any anxiety felt during the appointment. The waiting room in our office is ample, but not overly large. For that reason, we suggest that you limit your companions to just one individual. Because of the lengthy waiting periods required for this type of surgical procedure, infants and children are not appropriate in the clinical waiting area. While we do maintain a "playroom" for children, it is not supervised; we do not offer in-office child-care services.
- 9. Most of the important preparations for your surgical experience are in the Patient Education Information. We strongly urge you to review this before you arrive for your appointment. If you have questions before your appointment regarding the contents of the booklet, please do not hesitate to contact the office at your convenience. In order to perform proper wound care in the postoperative period, you will need bandage changes, which require bandage materials. There are materials available in our office for a nominal fee of \$10.00-\$15.00.
- **10.** The timing of suture removal depends largely upon the location of your skin cancer, and your subsequent reconstructive procedure. Typically, sutures on the face are allowed to remain in place for 5-7 days. You will need to plan to come back to the office to have these sutures removed. It is very important for

the provider to see you early in the postoperative period so that we can assess any possibility of surgical complications, though these are unlikely to occur. If you desire for any scarring to be minimal, sutures **MUST** be removed punctually. For that reason, it is unwise to schedule a lengthy trip or vacation immediately following your surgery. We will make every effort to minimize the number of return visits you will need to make. After the sutures are removed, a typical follow up visit will be scheduled 6-12 weeks later, to make note of how you are healing. At that time, in most cases, you are returned to the care of your referring provider.

- 11. Your physical limitations following surgery are unpredictable. Your ability to return to your normal activities depends largely upon the size, location, and complexity of your surgical site, and type of skin cancer. We will answer every question regarding post-operative activities on the day of your surgery.
- 12. **Referral to a plastic surgeon for your closure is an option.** I can repair most Mohs defects immediately after your margins are free. However, occasionally I will refer you to a plastic or ENT plastic surgeon who often can do your repair the same day. If you know ahead of time that you prefer a plastic surgeon to do your repair, please notify my office so we can coordinate that referral in advance.
- 13. If you have a question about your bill, please contact our billing department at (919) 442-2414.

I understand that you are probably anxious regarding your upcoming surgical appointment. I hope that this information will help to ease any anxiety and properly prepare you for your surgical visit. My staff and I are dedicated to provide you with the most current and safe surgical treatment for your skin cancer. If you have any suggestions to improve your visit with us, please do not hesitate to mention these suggestions to my staff or to me personally.

Feel free to ask questions before, during, and/or after your visit. My staff and I are happy to work with you in order to ensure a smooth and successful outcome.

#### **BENEFITS OF MOHS SURGERY**

- High cure rate: MOHS surgery gives the highest cure rate of any form of therapy for many types of skin tumors, usually basal cell carcinoma (99%) and squamous cell carcinoma (94%) skin cancers. The cure rate depends on certain conditions; the size of your skin cancer, location, type, your overall health, and whether or not it has been treated before. It should be understood, however, that a recurrence of the tumor is possible, even after MOHS surgery. Sometimes additional, alternative therapies are needed.
- Least amount of normal tissue removed: This allows for less potential scarring. It should be understood that ALL surgical excisions will, by definition, leave a scar.

#### RISKS

We cannot list every possible complication that could occur, but these are the most common risks or complications that can occur.

- Recurrence of the tumor at a later time. This is rare, but possible.
- Infection at the surgery site; sometimes antibiotics may be required.
- Bleeding at the surgery site.
- Fainting Please notify us if you tend to faint.
- Damage to sensory nerves this type of damage is common with skin surgery and can cause a change in the feeling or sensation at, and sometimes around, the surgery site. This is due to damage to sensory

- nerves. This sensory change often occurs, but usually resolves over a period of a few months. Sometimes this sensory change can be permanent with numbness and/or tingling.
- Damage to motor nerves this type of damage is rare. Motor nerve damage, if it occurs, is
  usually permanent. This would mean that you would lose the ability to move specific muscles.
  Usually facial muscles are involved. The most common motor nerves at risk are the ones that
  raise the eyebrow and the one that curls your lower lip. Ability to shrug the shoulders is rarely
  at risk if the tumor is located on the back or side of the neck.
- Scarring there is always a scar with any type of surgery. The size of the scar is dependent
  on the size of the tumor. Sometimes scars can be raised (hypertrophic) or keloids can form.
  Much of this risk is dependent on the site of the surgery and your skin type. Facial surgery
  does not usually leave hypertrophic or thick scars, but there is a small risk. Occasionally, a
  second procedure is needed to improve a scar whether the wound heals on its own, or is
  closed with sutures.
- Necrosis (loss of surgical repair) this is most likely if your surgical repair includes a flap or graft. Opening of the simple repair is also possible post operatively. Smoking makes this more likely.
- Allergic reaction there is always a small risk of an allergic reaction to any medication; including the local anesthesia you will receive. Please let the doctor know if you have any known allergic reactions. These reactions can be severe, even causing death in rare instances.

Beth Goldstein, M.D., F.A.A.D. Fellow, American Society for MOHS Surgery

# **Postoperative Wound Care Instructions**





Clean wound:

once daily

twice daily









Peroxide





Vaseline



Layers of **Bandage on Skin** 











Soak Q-Tip in mixture, roll across wound removing crust





**Blot with** dry gauze







Apply paper tape on top of non-stick bandage

## **COMPLICATIONS**



Redness, warmth, pain, swelling or a FEVER over 101° F, contact us

**Try PAPER TAPE** 

even if not allergic to adhesives

If BLEEDING, apply pressure for 15 minute. Set a timer. No peeking! If bleeding continues, contact us



# RESTRICTIONS

NO heavy lifting, bending, or stooping

Keep INITIAL dry dressing in place for: 24 hours

48 hours

If wound is on FACE, don't bend over or bend below the knee

RECOMMENDATIONS



Take acetaminophen (Tylenol) for pain, avoid aspirin, Ibuprofen (Advil, Motrin), and naproxen (Aleve) for first 24-48 hours



Apply ice to wound for 20 minutes on and 20 minutes off for first day to reduce swelling

**During office hours** call (919) 401-1994

After office hours, the answeringservice will contact physician on call 2238 Nelson Highway, Suite 100 Chapel Hill, NC 27517 (919) 401-1994

www.centraldermcenter.com

508 Carthage Street Sanford, NC 27330 (919) 776-5286

110 Preston Executive Drive Suite 108, Cary, NC 27513 (919) 653-1344

### \*\*Caution: Your GPS may not find this address\*\*

#### **Driving Directions to Central Dermatology Center-Chapel Hill Office**

2238 Nelson Highway, Suite 100 Chapel Hill, NC 27517 (919)401-1994

\*\*Alternative GPS address- 100 Celeste Circle, Chapel Hill, NC 27517\*\*

#### FROM RALEIGH/CARY/RTP

Take I-40 West to Exit 273A to merge onto NC Hwy 54W toward Chapel Hill. Stay in the far right lane on the cloverleaf exit ramp. Once on Highway 54, pass through 2 stoplights (the second of which is Farrington Rd.) After passing through the 2<sup>nd</sup> stoplight, take the first right. Take an immediate right turn on to Nelson Highway. Central Dermatology is in the first building on the left. Please check in at Suite 100, the first door on the left.

#### FROM HILLSBOROUGH/MEBANE/GREENSBORO

Take I-40 East to Exit 273. At the end of the exit ramp, take a right at the light. After passing through the stoplight, which is Farrington Road, take the first right. Take an immediate right turn on to Nelson Highway. Central Dermatology is in the first building on the left. Please check in at Suite 100, the door farthest to the left.

#### FROM SANFORD/PITTSBORO

Take Highway 15-501 North toward Chapel Hill. Take the exit for 15-501 and 54 East TOGETHER toward Raleigh. After less than a mile, take a second exit for 54 East. You will pass the Friday Center on the right and the Meadowmont development on your left. At the Huntingridge Road stoplight, take a left. Take an immediate right onto Nelson Highway at the stop sign. Continue through the first stop sign on Nelson Highway, and Central Dermatology is in the first building on the left. Please check in at Suite 100, the door farthest to the left. If you pass Hardees or cross I-40, you have gone too far.

#### FROM SILER CITY

Take 64 East to Highway 15-501 North toward Chapel Hill. Take the exit for 15-501 North and 54 East TOGETHER toward Raleigh. After less than a mile, take a second exit for 54 East. You will pass the Friday Center on the right and the Meadowmont development on your left. At the Huntingridge Road stoplight, take a left. Take an immediate right onto Nelson Highway at the stop sign. Continue through the first stop sign on Nelson Highway. Central Dermatology is in the first building on the left. Please check in at Suite 100, the first door on the left. If you pass Hardees or cross I-40, you have gone too far.

#### FROM THE PINEHURST AREA

Take US 1 North toward Sanford. In Sanford, take US 15-501 North toward Chapel Hill. Take the exit for 15-501 & 54 East TOGETHER toward Raleigh. After less than a mile, take the second exit for 54 East. You will pass the Friday Center on the right and the Meadowmont development on your left. At the Huntingridge Road stoplight, take a left. Take an immediate right onto Nelson Highway at the stop sign. Continue through the first stop sign on Nelson Highway. Central Dermatology is the first building on the left. Please check in at Suite 100, the first door on the left. If you pass Hardees or cross I-40, you have gone too far.

#### FROM 1-85 IN NORTHERN DURHAM/CREEDMOOR/BUTNER

Take I-85 South to Highway 15-501 South. On Highway 15-501 South, merge onto I-40 East. Take exit 273 and at the light at the end of the exit ramp, turn right. Pass through the Farrington Road stoplight, and take the first right. Take an immediate right onto Nelson Highway. Central Dermatology is in the first building on the left. Please check in at Suite 100, the first door on the left.

#### FROM FAYETTEVILLE

Take I-95 North until exit 81, where you will merge onto I-40 West toward Raleigh. From I-40, take exit 273A for 54 West toward Chapel Hill. Stay in the far right lane as you exit on the cloverleaf. Pass through two traffic lights (the 2<sup>nd</sup> light is at Farrington Rd), and you will see a Hardees on the left. Take the first right after the Farrington Road traffic light, and take an immediate right onto Nelson Highway. Central Dermatology is in the first building on the left. Please check in at Suite 100, the first door on the left.



**Central Dermatology Center (Chapel Hill location)** 

#### Driving Directions to Central Dermatology Center-Sanford Office; 1210 Central Drive

#### FROM PITTSBORO/Durham

Take US-15 S/US-501 S/US-64 Business South toward East St. Continue to follow US-15/US-501 FOR 13.0 mi. At the traffic circle, take the 2<sup>nd</sup> exit and stay on US-15 S/US-501 S. Use the right lane to take the ramp and merge onto 87 S/US-15 S/US-1501 S. Take the NC42 exit toward Asheboro. Turn left on NC42E/Wicker St. Turn right on Carthage, left on Fields, left onto Central Drive. Destination is on the right.

#### FROM RALEIGH

Take I-40 W toward I-440 N. Take Exit 293 for I-440E/US-1 S (0.9 miles). Keep left at the fork, follow signs for Buck Jones Rd/Crossroads Blvd. Keep left, follow signs for US-64 W/US1 S and merge onto US-1 S/US-64 W for 33.1 miles. Take the NC42 exit toward Asheboro. Turn left on NC42E/Wicker St. Turn right on Carthage, left on Fields, left onto Central Drive. Destination is on the right.

#### FROM FAYETTEVILLE

Follow NC-87 N to Bragg Blvd. Continue to follow NC-87 N which becomes Horner Blvd. Turn left onto Fields Drive, then left onto Central Drive. Destination is on the right.

#### **FROM PINEHURST**

Take US-15 N/US-501 N (21.0 mi). Turn left onto U.S. 1 N/US-15 N/US-501 N (4.6 mi). Take the NC 42 exit toward US-1 BUS/ Asheboro/Fuquay -Varina (0.3 mi). Keep right at the fork, follow signs for NC 42 E and merge onto Wicker St/NC 42 E (1.0 mi). Turn right onto Carthage, left on Fields, right on Central Drive. Destination is on the right.



**Central Dermatology Center (Sanford location)**