



### **MOHS SUGERY**

Mohs sugery is a precise surgical technique used to treat skin cancer.

During Mohs surgery, Dr. Nayyar will remove and examine layers of skin that contain cancer until only cancer free tissue remains. Mohs is also known as Mohs microscopic surgery.

The goal of Mohs surgery is to remove as much of the skin cancer as possible, while preserving surrounding healthy tissue. Mohs surgery allows Dr. Nayyar to verify that all cancer cells have been removed at the time of surgery. This increases the chance of a cure and reduces the need for additional surgery.

Mohs surgery is used to treat the most common skin cancers: basal cell carcinoma and squamous cell carcinoma, as well as some types of melanoma and other more unusual skin cancers.

It is especially useful for skin cancers that:

- Have a high risk of recurrence.
- Areas where we want to preserve as much healthy tissue as possible such as around eyes, ears, nose, mouth, hands, feet and genitals.
- Have borders that are hard to define.
- Are large or aggressive.

### **RISKS**

As with any surgical procedure, Mohs surgery carries the risk of:

- Bleeding
- Pain or tenderness around the surgical site
- Infection

### **PREPARING FOR SURGERY**

Dr. Nayyar may recommend ways you can prepare for your procedure. You may be asked to:

**Clear your schedule for the day.** It is not possible to predict how long your procedure will take. Plan on a minimum of two and a half hours.

**Wear comfortable clothing.** Wear casual clothes that are comfortable. Dress in layers so that you can easily adapt if the room is warm or cold.

**Bring something to help you pass the time.** You will spend time waiting during your procedure. Bring a book, magazine or other activity to help you pass the time.

### **WHAT TO EXPECT**

Mohs surgery is done on an outpatient basis in one of our procedure rooms. Our lab is located in our office and allows Dr. Nayyar to examine the tissue after it is removed.

To prepare you for surgery, Dr. Nayyar or a medical assistant will cleanse the area to be operated on, outline it with a special pen and inject the area with a local anesthetic. You will not feel any discomfort during the procedure.

Once the anesthetic has taken effect, Dr. Nayyar will use a scalpel to remove the visible portion of the cancer, along with a thin underlying layer of tissue that is slightly larger than the tumor. A temporary bandage is placed on your incision. This only takes a few minutes. You will be returned to the surgical waiting area.

The tissue is taken to the lab for analysis. This is the portion that takes the longest amount of time. Expect to wait about an hour for the results.

If the margins are clear, Dr. Nayyar will start the closure procedure. If the margins are not clear, Dr. Nayyar will repeat the process until the margins are clear.

### **POST PROCEDURE**

Once all the cancer has been removed, Dr. Nayyar will review on how best to repair the wound.

There are several ways to repair the surgical site.

- Letting the wound heal naturally
- Using sutures to close the wound
- Shifting skin from an adjacent area (skin flap) to cover the wound
- Using a skin graft from another part of the body, such as from behind the ear to cover the wound.
- If the surgical area is extensive or complex, Dr. Nayyar may temporarily close the wound and then
- refer you to another surgeon (usually a plastic surgeon) for reconstructive surgery.

### **WOUND CARE FOLLOWING MOHS**

It is normal to have some soreness for the first 48 to 72 hours after surgery. For most patients, Acetaminophen (Tylenol) taken at a dose of 1000 mg every 6 hours will keep you comfortable (max dose of 4000 mg/24 hr.) Do not consume alcohol while you are taking Acetaminophen, and do not take Acetaminophen if you have a history of liver disease.

- Cold compresses with a bag of ice or frozen peas can help minimize pain, swelling, and bruising and can be used every 15 minutes out of every hour. The area may remain numb for several weeks or even months. The suture line may remain pink for months following surgery.
- Keeping the surgical site elevated can also minimize pain and swelling. If your surgery was on your head or neck, we recommend sleeping with an extra pillow for a few nights.
- Please avoid any exercise while the sutures are in place. Walking is fine, but any activity that makes your heart race or makes you sweat should be avoided.
- You may notice a small amount of blood on your bandage for the first few days-this is normal.

### **WOUND CARE INSTRUCTIONS:**

- Unless instructed otherwise, keep the original dressing clean and dry (no showering) and leave it in place for 24 to 48 hours. After 24 to 48 hours, you may start your routine wound care as outlined below and get the area wet in the shower. If steri-strips have been placed, no further wound care needs to be performed until the steri-strips fall off.
- Do not submerge your wound (such as in a pool or tub) for 2 weeks.

At each dressing change (one to two times per day):

1. Wash your hands with soapy water.
  2. Remove bandage and gently wash area with warm soapy water, rinse, then pat dry with a clean towel. Avoid rubbing the surgical site.
  3. Using a clean cotton-tipped applicator (Q-tip), apply a thin film of petroleum jelly (Vaseline) or antibiotic ointment as directed to the surgical site, then apply a non-adherent dressing such as Telfa and secure it with tape or a wrap. If the wound is small, a bandage such as a Band-Aid may be used.
  4. Using these instructions, clean your surgical site one to two times per day until your scheduled appointment to have your sutures removed or if no sutures need to be removed, for one to two weeks.
- Call the office if you notice any of the following symptoms:
    1. Increasing pain, tenderness, or swelling at the surgical site.
    2. Increasing redness or warmth around the surgical site. A thin pink rim is a normal part of wound healing.
    3. Thick, yellow, or green drainage from the surgical site.
    4. A body temperature of 100.4 degrees F without signs of coughing, sore throat, vomiting or diarrhea.
    5. If your surgical site is bleeding, hold firm pressure for 30 continuous minutes (no peeking).

If you have questions or concerns, please call the office at (727)888-0900.  
After hours emergency, please call (727)344-9905.