

Mohs Surgery Checklist

Two Weeks Before Surgery

- Make scheduling arrangements for the surgery. The surgery usually takes 2-3 hours to complete, but may take longer. Plan to spend the entire day at the clinic. You will need to avoid strenuous activities for at least one week following surgery.
- Make travel arrangements for the surgery. It is best to have someone drive you.
- Stop smoking. Smoking impairs the body's ability to heal. Smoking will increase your risk for infection and excessive scarring due to surgery. Stop smoking at least one week before and for two weeks after your surgery.

The Day of Surgery

- Eat your regular meals on the day of surgery, but make the meals light.
- Take all of your regular medications unless specifically directed otherwise by your doctor.
- Do not apply any cosmetics, lotion, or medication to the area to be treated.
- Wear loose comfortable clothes and a shirt that can be easily removed if needed.
- Bring a snack and a form of entertainment (ie book, ipad, etc.) to your appointment.

After the Surgery

- Take it easy....rest the day of surgery.
- Avoid strenuous activity for at least a week after the procedure. Ask your doctor for specifics.

Consent for Mohs Surgery and Surgical Repair

Patient Name: _____

Proposed Procedure: _____

Benefits of Mohs Surgery:

- Mohs surgery has the highest published cure rates for all forms of therapy for skin cancers. Mohs surgery is reported up to 99% effective for previously untreated skin cancers and about 85% effective for skin cancers that have failed previous treatment attempts. Cure rates are also influenced by factors such as size, location, and type of skin cancer.
- Mohs surgery spares the most amount of normal skin. Because the Mohs surgeon carefully checks all the margins of the cancer excision under the microscope, less normal tissue has to be initially removed.

Risks of Mohs Surgery:

- Infection at the surgery site occurs in approximately 1-2% of patients.
- Bleeding occurs in approximately 1% of patients.
- Damage to sensory nerves is common and usually resolve completely or partially within a year. Sometimes this sensory change can be permanent.
- Damage to motor nerves (nerves that move the muscles of facial expression) is rare, but is typically permanent. Nerves that control the muscles that lift the brow and curl the lower lip are most vulnerable to injury. Sometimes they must be sacrificed if invaded by tumor.
- Scar formation will result from any skin surgery. Thick, raised scars are uncommon in facial surgery. A second procedure is needed to improve a scar left by Mohs surgery in less than 10% of cases.
- Allergic reactions to local anesthesia or to latex gloves are very rare. If you believe you are sensitive to these, please let us know.

Alternatives to Mohs surgery:

Patients may choose to have their skin cancers: not treated (risky and not recommended), have them removed with regular excision (up to 90% cure rate for primary tumors), or treated with destruction, or radiation.

Reconstruction (Repair of the defect):

Repair of the defects left following removal of skin cancers is guided by the goals of providing the best possible cosmetic outcome with the least possible risk and morbidity. Common options include: simple closure with stitches, skin flaps which borrow adjacent skin to fill a defect, and skin grafts which borrow distant skin to patch a defect. Some defects heal best by simply letting them heal, without any further surgery. There is always a small chance that tissue moved in a repair will not “take”, that is, it will not survive. This most commonly occurs in smokers. Occasionally, we refer patients to other specialists for repair.

Risks (Please read and initial below)

___ The procedure will leave a scar.

___ The skin cancer may grow back.

___ The skin cancer and the resultant surgical wound may be larger than predicted.

___ There is a risk of infection of the surgical site.

___ There is a risk of prolonged bleeding during and after the procedure.

___ There is a slight risk of allergic reaction or other adverse reaction to the anesthetic (numbing medicine).

___ There is a risk that the repair may not heal well. This can result in greater scarring and a longer time needed to heal.

___ Occasionally, the skin cancer invades structures including blood vessels, nerves, and tendons. These structures may be damaged while removing the cancer or repairing the resulting defect. Depending on the location of the skin cancer, areas such as the eye, the lips, the ear, and other important structures may be damaged. The damage could make the structure not work right. This damage may be permanent.

___ The risks, benefits, and alternatives of this procedure have been explained to my satisfaction. I have had the opportunity to ask my doctor questions about this procedure, and these questions have been answered to my satisfaction. I freely consent to have the described procedure performed.

Patient Signature: _____ **Date:** _____

Witness: _____ **Date:** _____