

Patient Education provided by **Leslie Storey, MD**
Board Certified, Mohs Fellowship Trained, Dermatologist



PREPARING FOR YOUR MOHS SURGERY

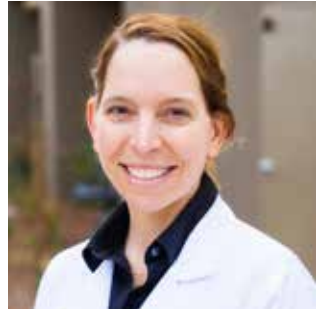
Your surgery date is:



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The cure rate with
Mohs surgery is
approximately 95%

LESLIE STOREY, MD
Board Certified Dermatologist
Mohs Fellowship Trained Surgeon



Thank you for choosing Valley Skin Institute for your dermatological care. We want you to know that you are in good hands. We are experienced professionals committed to these core values as we serve every patient.

- **COMPASSION** – We care for patients with integrity, kindness, and respect.
- **EXCELLENCE** – We deliver an excellent patient experience through our providers, our staff, our professionalism, technology, and environment.
- **EDUCATION** – We teach patients about all areas of skin care. We are also committed to ongoing medical education.
- **COMMUNITY** – We volunteer, educate, and contribute to the Central Valley of California.

This booklet was created to educate you about your upcoming Mohs procedure. It should answer most of your questions, and help alleviate some concerns. However, if there is anything we can do to help relieve anxiety and make your day as comfortable as possible, please don't hesitate to let us know.

To Your Health,

A handwritten signature in black ink, appearing to read 'L. Storey'.

Leslie Storey, MD

WHAT IS MOHS SURGERY?

A Highly Effective Technique for the Removal of Skin Cancer

Mohs micrographic surgery is a specialized, highly effective technique for the removal of skin cancer. The procedure was developed in the 1930s by Dr. Frederic Mohs and is now practiced throughout the world. You may hear it called Mohs surgery, chemosurgery, microscopically controlled excision or Mohs micrographic surgery – they are all the same procedure.

Mohs surgery differs from other skin cancer treatments because it includes the immediate and complete microscopic examination of the removed cancerous tissue so that all "roots" and extensions of the cancer can be eliminated. The methodical manner, in which tissue is removed and examined, makes Mohs surgery

so successful. Additionally, Mohs preserves as much healthy skin as possible.

While skin cancers are usually visible to the patient, individual cancer cells are microscopic and any cells left behind can cause the tumor to reappear. The tumor may spread beyond its obvious external margins, with "nests" of cells growing in unpredictable areas. With the Mohs technique, all tumor nests can be identified and removed with a high degree of accuracy.



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When & How is Mohs Performed?

Mohs surgery is recognized as a precise method for treating skin cancers of the face and other cosmetically sensitive areas because it can eliminate all the cancer cells while causing minimal damage to the surrounding normal skin.

Mohs surgery is also ideal for the removal of recurrent skin cancers tumors that reappear after previous treatment.

First, the suspicious skin lesion is treated with a local anesthetic, so there is no feeling of pain in the area. A thin piece of tissue is removed and carefully divided into pieces that will fit on a microscope slide. Then, the edges are marked with specially colored dyes, a map of the tissue is

made, and a pathology technician freezes the tissue.

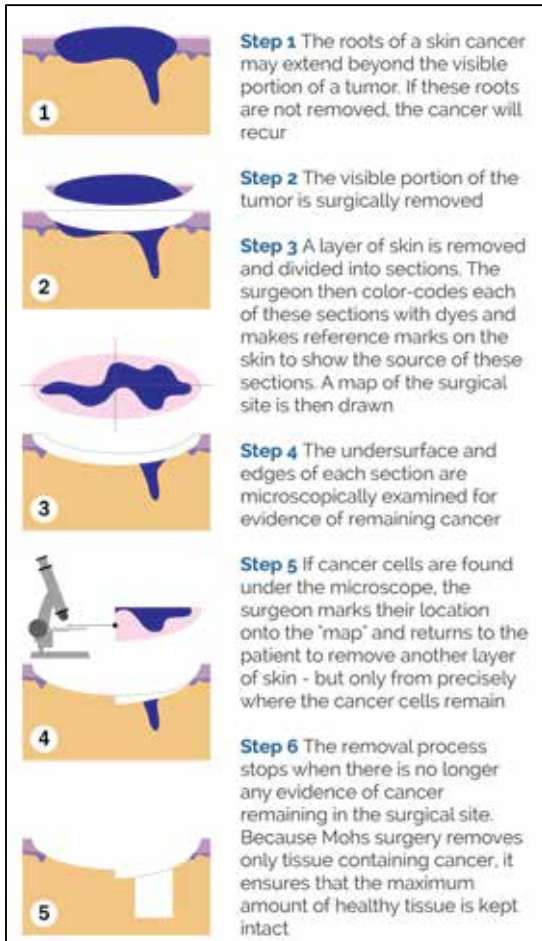
Thin slices can then be made from the frozen tissue and examined under the microscope so the surgeon can tell if any tumor is present.

If cancer cells are seen, the patient is taken back to the procedure room where another layer of tissue is removed. The procedure is repeated as often as necessary until no cancer cells remain.

Expect to be here for 6 to 8 hours.

Mohs is a time-consuming procedure, and there is a lot of waiting required while the tissue is being prepared and examined in our laboratory. You will be waiting between 60 and 90 minutes after each layer is removed.

HOW DOES MOHS WORK?



After Mohs surgery, you will be left with a surgical wound that will be repaired in one of the following ways:

- Closing the wound, or part of the wound, with stitches
- Various skin closures, such as skin grafts and flaps, or reconstructive procedures
- Healing by spontaneous granulation
- Referral to a plastic or oculoplastic surgeon for reconstruction

REPAIRING THE SURGICAL WOUND

Using Stitches

- **Side-to-side closures** – These stitches are common for smaller wounds. This involves some adjustment of the wound and stitching the edges together. The procedure speeds healing and offer a good cosmetic result; for example, the scar can be hidden in a wrinkle line. It's important to note that the scar is always larger than the size of the skin cancer.
- **Flap closures** – Skin is moved from an area next to the surgical site. This leads to more stitches than you may have anticipated and a scar with a geometrically shaped closure such as a T, Z or W.
- **Grafts** – A second wound is created to obtain skin (this is the donor site). This is usually taken from a "non-cosmetic" site (from behind the ear, for example) to minimize scarring. The stitches will remain in place for approximately 5-14 days, depending on the site of the lesion.



Spontaneous Granulation

Sometimes the wound is left open to heal itself, and this is called healing by spontaneous granulation. Experience has taught us that there are certain areas of the body where nature will heal a wound as nicely as any further surgical procedure.

If healing results in an unacceptable scar, some form of cosmetic surgery can be performed at a later date. If the wound is allowed to granulate, it requires daily dressing changes and usually heals in four to eight weeks.

WHAT CAN I EXPECT FOLLOWING SURGERY?

Your post-operative care will be thoroughly explained to you by a team member from Valley Skin Institute, and you will also be given written instructions.

Pain

The worst pain is generally encountered about four hours after the surgery. The most important thing for pain control is to **use an ice pack or frozen peas for ten minutes every hour.**

If the pain is not manageable, take one Tylenol. After two hours if you're still having pain, take one Advil. You must make sure that your regular medications do not interact with either Tylenol or Advil. The pain should gradually subside over the week. If it worsens, please call the office as it may be a sign of an infection or another surgical complication.

Bleeding

Occasionally, bleeding occurs after surgery. If you bleed, leave the dressing in place and apply pressure

with a gauze or similar pad. You may support yourself against a couple of pillows in a semi-upright position and apply constant pressure over the bleeding site for 20 minutes.

Swelling & Bruising

Swelling and bruising are very common, especially when surgery is performed around the eyes and nose. These conditions subside by keeping your head elevated and by using ice-packs regularly for ten minutes every hour for up to the first 24 hours following surgery.

When to Call

If redness and pain do not subside within two days, or if the wound begins to drain or discharge, you may have an infection, and you should call Valley Skin Institute at **559-472-SKIN.**

RISKS & COMPLICATIONS



Our number one priority is total removal of the skin cancer.

Incompletely removed skin cancers can recur and in some cases spread to other parts of the body.

All surgery carries risks and can develop complications. After your Mohs surgery, these may include bruising, swelling, bleeding, infections, numbness, scarring, and skin tightening or stretching. Most of these problems will resolve with time, but you will always be left with a scar.

Nerve damage is usually temporary and recovers, but can be permanent in some cases if the cancer is extensive and the nerve is involved.

Scarring from the surgery usually settles well. Flaps and grafts take time to heal but improve significantly within 3-6 months.

Your scar may require massage, cortisone injections or further surgery to improve the appearance.

Sometimes the extent of skin cancer and the complexity of the wound require a larger reconstruction leaving a more prominent scar. If this occurs, Dr. Storey will discuss a range of options with you.

PREPARING FOR SURGERY

The Week Before Surgery

- Discontinue vitamin and mineral therapy for at least a week before your surgery.
- If surgery will be performed near the eye, please arrange for someone to drive you. You must not go home on public transportation or drive following your surgery.
- Please have Tylenol and Advil (or the generic version) for pain relief.
- Please have an ice-pack or frozen peas pack, ready to use after you return home from surgery.



Day of Surgery

- **The best preparation for Mohs surgery is a good night's rest followed by a substantial breakfast.**
- Wash your hair the night before, or the morning of your surgery.
- Do not wear make-up on your surgery day.
- Wear comfortable, loose-fitting clothes, such as a track suit, slacks, a cardigan, a short-sleeved shirt or blouse and comfortable shoes (shoes stay on your feet). An old button up shirt is preferable.
- Because you will be with us for at least half a day, please bring a packed lunch. We provide tea, coffee, crackers and usually pizza.
- We encourage you to bring reading materials and/or a companion on the day of your surgery. WiFi is available.

Continue taking all of your prescribed medication unless instructed by your surgeon.

YOUR SURGERY TEAM

Intensive Training & Extensive Experience

Mohs surgery at Valley Skin Institute involves a team of people. Dr. Storey is the head of that team and will be supported by a group of highly skilled and specially trained doctors, nurses, and technicians.

Dr. Storey has completed thousands of Mohs procedures and is fellowship trained Mohs Surgeon.

Fellowship training programs are comprehensive and rigorous because skin cancer itself occurs in a diversity of forms, degrees, and areas of the body.

By choosing a fellowship trained Mohs Surgeon you can be assured that you will receive the highest standard of quality and competency, as well as an optimal outcome.

Dr. Storey received her training in one of the nation's first accredited Mohs Surgery and Cosmetic Dermatology Procedure programs. This program is so rigorous that it only accepts one Fellow per year. Dr. Storey trained under Abel Torres, MD former president of the American Academy of Dermatology.

To complete her ACMS-approved fellowship, Dr. Storey

- Participated in a minimum of 500 Mohs surgery cases
- Learned to accurately interpret slides of tissue samples that have been removed during surgery
- Performed a wide breadth of reconstructions, ranging from simple closures to complicated multi-step repairs

She has been performing Mohs surgery since 2007.





Valley Skin Institute is the home of Dr. Leslie Storey, Board Certified Dermatologist who specializes in Mohs Surgery for the removal of skin cancer.



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