

GOLDMAN DERMATOLOGY, PLLC
150 Broadway, Suite 1110, New York, NY 10038
(212) 962-1115 fax (212) 962-1246
www.goldmandermatology.com

INSTRUCTIONS FOR YOUR MOHS SURGERY

Medications: Continue all of your prescribed medications. If you are taking aspirin or other blood thinners as prescribed by another physician, these should be continued unless specifically addressed otherwise by the surgeon. If you are taking aspirin as prophylaxis, with no history of heart disease or stroke, please discontinue it for at least 10 days prior to surgery. Do not take any non-steroidal anti-inflammatory medications, vitamin E, garlic, or herbal supplements for at least 10 days prior to surgery, unless you discuss it with the surgeon. **Alcohol:** Do not drink any alcohol one week before and one week after the surgery.

The day of the procedure:

- Eat a normal breakfast the day of the surgery. **Bring lunch or snacks** as you may need to spend the whole day with us.
- Wear comfortable dark clothing. Please, select a shirt that buttons up the front, instead of slipping over your head.
- Take a shower and wash your hair on the morning of your surgery. **Do not apply makeup** if your surgery is on the face.
- Be prepared to **WAIT!** Local anesthesia is used, and you will be awake during the procedure. Mohs surgery is done in stages. During each stage a thin layer of tissue is removed and brought to our in-office laboratory for examination. The wound is dressed and you are permitted to return to the waiting room. The first stage may take up to two hours. If additional tumor exists, you will be brought back to the operating room where the next layer is removed and brought to the lab for processing and examination. Surgery continues until all margins are clear of tumor.
- Once the tumor is cleared, repair options will be discussed with you and, if appropriate, a repair will be performed. Occasionally, a wound is allowed to heal by itself without a repair. At other times, you may be referred to a plastic surgeon for the repair. Please be prepared to have a scar! Unfortunately, skin cancers are often larger than seen by the naked eye and, as a result, the scars are frequently larger than expected. The goal of the surgery is to remove all the cancer and leave you with as excellent a cosmetic result as possible.
- The nature of the procedure is such that you may need to spend the whole day with us. You might want to bring some reading material to help pass the time. If possible, please bring a family member or a close companion as it may be necessary for him/her to change your dressing, drive you home, or just keep you company.

After the surgery: An appointment will be made for wound assessment and management ranging from days, weeks, to months. Usually, the sutures are removed in 1-2 weeks. We ask you to avoid exercise, heavy lifting, bending, or other kinds of exerting activities for the duration of the sutures. Periodic follow-ups should be made with your referring physician to assess for new cancers or recurrences. Although Mohs surgery has the highest cure rate compared to other methods of skin cancer treatment, a small number of patients have recurrences, and it is recommended that all return appointments be kept.

AFTER YOUR SURGERY

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AFTER YOUR SURGERY

Discomfort after surgery is usually minimal. Tylenol, two tablets every four hours, should help to relieve the pain. To lessen the discomfort, relieve swelling, and minimize bruising, an ice pack may be applied over the dressing every 1-2 hours for twenty minutes. Elevation of the wound is also helpful.

A pressure dressing has been applied to prevent bleeding and minimize swelling. You may notice a small amount of blood on the edges of the dressing which is normal. If bleeding persists, remove bandage and use a clean cloth to apply firm pressure for 30 minutes, *without letting up*. If the bleeding persists, repeat the pressure for an additional 30 minutes.

IN CASE OF EMERGENCY: DURING OFFICE HOURS call the office and tell the operator you are a surgical patient of Dr. Maydan and need help. AFTER OFFICE HOURS, call 646-734-3438 to speak with Dr. Maydan. If you are having difficulty getting help, go to a local Emergency Room or to your private physician.

CHANGING THE DRESSING (see checked off supplies you will need)

_____ Normal Saline	_____ Band-aids
_____ Hydrogen Peroxide	_____ Paper/Plastic Tape
_____ Bactroban ointment ONLY	_____ Gauze Sponges
_____ Polysporin ointment or Bacitracin	_____ Soap and Water
_____ Telfa dressing or non-stick dressing	_____ Vaseline ointment
_____ Xeroform petrolatum dressing	_____ Q-tips

1. Please wash your hands before and after wound care.
2. Sterilize your scissor in boiling water for 3 minutes. Pat dry and place into a ziplock bag.
3. The first dressing change should begin approximately ____ hours after the dressing was applied.
4. Gently remove the old dressing.
5. Dip Q-tips into normal saline or hydrogen peroxide as indicated above and gently cleanse the wound by rolling the Q-tip in a downward direction. Do not reinsert a used Q-tip into the solution. For stubborn crusting of old drainage of blood, wet a gauze pad well with normal saline or hydrogen peroxide and allow it to sit directly on the crusted area for 5 minutes. This will allow the debris to loosen, so the area can be properly cleansed.
6. Dry the area with gauze or a dry Q-tip.
7. Apply a thin layer of ointment.
8. Cover the wound with a non-stick dressing and tape if necessary.
9. Follow this procedure twice daily until you return for suture removal.

DURING THE HEALING PROCESS

- Upon removing the initial dressing, you may shower and allow the wound to get wet; however, do not allow the forceful stream of the water to hit the wound directly.
- If the wound is on your scalp, you may wash your hair with a baby shampoo to avoid any irritation.
- A low grade fever may develop. Tylenol may be used. Avoid aspirin and aspirin-like products (Advil, Motrin) for at least 3 days after surgery.
- Avoid alcohol for 3 days after surgery.
- The area may remain numb and be mildly itchy. You may also experience periodic discomfort around the wound as part of the healing process.
- The edges of the wound will be pink and tender. If you get increased redness, increased pain, warm to the touch and/or oozing from the site, **CALL THE OFFICE IMMEDIATELY.**
- If your surgery is on the forehead, eye swelling and bruising may develop. It usually resolves without complications.
- Please remember that your follow-up visits are very important. At least an annual skin exam and sun protection are needed for any patient with a history of skin cancer.