

Mohs Micrographic Surgery: A Patient Guide

This brochure will acquaint you with the procedure known as Mohs Micrographic Surgery. We hope this information will answer many of your questions. This information is meant to supplement, not replace, a personal preoperative consultation. Additional information and a four-minute educational video about Mohs Surgery is available on our website at www.SkinCancerAndDerm.com.

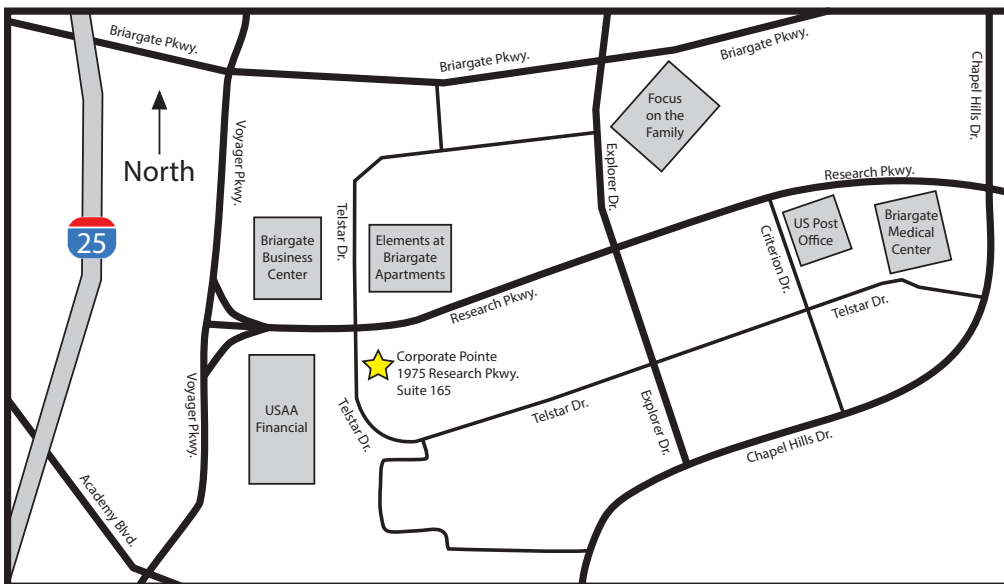
About Brett K. Matheson, M.D., FACMS



Brett K. Matheson, M.D., FACMS is the third generation in his family to call Colorado Springs home. After graduating from Georgetown University School of Medicine, he served nine years as a medical officer in the United States Navy, including two tours to Japan. He completed a Dermatology residency at the Naval Medical Center in San Diego and a fellowship in Mohs Micrographic Surgery at the University of Colorado Health Sciences Center in Denver.

Dr. Matheson is board certified in Dermatology and has been elected a Fellow of the American College of Mohs Surgery. As an Assistant Clinical Professor at the University of Colorado, he teaches at national Dermatology meetings. He has performed over 21,000 Mohs surgeries. When not working, Dr. Matheson enjoys playing tennis and spending time with his wife and three grown daughters.

Directions to our Colorado Springs Office



The office is located in the Corporate Pointe Building on the southeast corner of Research Parkway and Telstar Drive. It is a three-story white building. Our office is on the same side of Research Parkway as the USAA Financial Building.

From I-25: Take Exit 151 (Briargate Parkway). Turn right onto Voyager Parkway. At the first stoplight, make a left onto Research Parkway. Take the first right onto Telstar Drive and then take the first left into the parking lot of 1975 Research Parkway, Suite 165. The office can be accessed directly from outside the building. The suite door is next to the main entrance doors.

From Academy Boulevard: Take Academy Boulevard north past the Chapel Hills Mall. Turn right onto Voyager Parkway. At the second stoplight, turn right onto Research Parkway. The USAA building is on the right hand corner. Take your first right onto Telstar Drive and then take the first left into the parking lot of 1975 Research Parkway, Suite 165. The office can be accessed directly from outside the building. The suite door is next to the main entrance doors.

From Powers Boulevard: Take Powers north. Turn left onto Research Parkway. Turn left onto Telstar Drive. (The USAA building will be on your right after your turn onto Telstar) Take the first left into the parking lot of 1975 Research Parkway, Suite 165. The office can be accessed directly from outside the building. The suite door is next to the main entrance doors.

Introduction

What is Mohs surgery? Mohs surgery is a highly specialized technique for treating skin cancer. Mohs surgery is named in honor of Dr. Frederic Mohs (pronounced Mōz), the physician who developed the technique. This method differs from all other methods of treating skin cancer by the use of a precise “mapping” technique and complete microscopic examination of all the tissues removed, which allows the surgeon to remove every cancer cell.

The procedure is begun after the skin is injected with a local anesthetic to completely numb the area. Then the visible cancer and a very thin layer of skin around it is removed. Next, this tissue is processed in a special manner at our in office lab, and the tissue examined under the microscope. Dr. Matheson examines the entire bottom surface and outside edges of the tissue. If any tumor is seen during the microscopic examination, its location is pinpointed, and a thin layer of additional tissue is excised from the involved area. The microscopic examination is then repeated. The entire process is repeated until the cancer is completely removed.

What are the advantages of Mohs surgery? Mohs surgery has two major advantages over other methods. First, because the cancer is removed in a layer-by layer process, there is preservation of as much of the normal surrounding tissue as possible. Second, the systematic microscopic search for the “roots” of the skin cancer results in the highest possibility for curing the cancer.

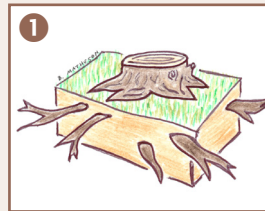
What are my chances for cure? Mohs surgery offers the highest success rate among skin cancer treatment methods, while sparing normal tissue. The success rate is very high, often 95-99%, even if other forms of treatment have failed. Other methods of treatment offer only a 50% chance of success if previous treatments have failed.

What happens the day of surgery? Your appointment will be scheduled early in the day. This allows us to continue the surgical steps throughout the entire day, if necessary. We will obtain your written consent for the procedure, take photographs, and record your blood pressure. After you are escorted to our surgical suite, the area around the skin cancer will be numbed. The first layer of skin will be taken and a temporary dressing placed over the wound. You will then be free to return to the waiting room. The surgical procedure alone takes only about 15 minutes. However, it takes a minimum of 1-2 hours to prepare and microscopically examine the tissues of each layer. Although there is no way to tell before surgery how many stages will be necessary, most cancers are removed in three stages or fewer. Typically, several patients undergo Mohs surgery in our office on the same day.

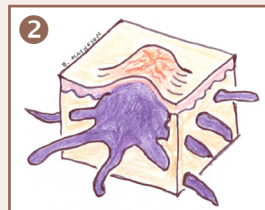
Will I be hospitalized? No. Mohs surgery is performed in an outpatient surgical suite under local anesthesia, and you may return home the same day.

Will the surgery leave a scar? Yes. Any form of treatment will leave a scar. However, because Mohs surgery removes as little normal tissue as possible, scarring is minimized. After the cancer is removed, we may choose to (1) let the wound heal by itself, (2) repair the wound with stitches, or (3) reconstruct the wound with a skin graft or flap. This decision is individualized to provide the best cosmetic result. In some cases, other surgical specialists may be used for their unique skills in reconstruction. When another surgeon completes the reconstruction, it may take place on the same day or on a subsequent day. There is no harm in delaying the reconstruction for several days.

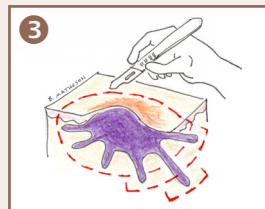
Will I have pain after surgery? Most patients do not complain of pain. If there is any discomfort, acetaminophen (Tylenol) is all that is usually needed for relief. If necessary, prescription pain pills will be prescribed.



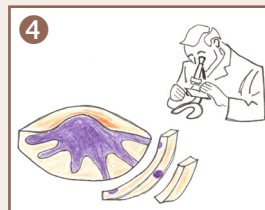
Roots extend deeper and wider than the tree stump viewed from above.



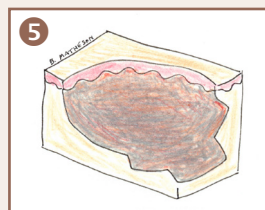
Likewise, skin cancers such as basal cell carcinoma and squamous cell carcinoma often extend beyond the apparent size on the surface of the skin.



Mohs surgery involves a special method of excising and processing tissue. The entire margin around and below the cancer is examined.



Each layer of tissue is examined by the Mohs surgeon under the microscope. Remaining cancer cells are pinpointed and mapped. The process continues in stages until no cancer cells remain.



Because only a small amount of normal tissue is excised, the size of the resulting wound is minimized and scarring is reduced.

Insurance and Referral Information

We participate in Medicare and most commercial insurance plans. If your insurance requires a referral, please request the referral from your Primary Care Physician. The referral must be received prior to the surgical procedure. Please complete your patient information forms and bring them to your appointment along with your photo ID and insurance card(s). Payment of your estimate of cost, which may include co-pay, deductible, and/or co-insurance, is expected on the day of surgery.

Preparing for Surgery

Medications: If you are on blood thinning medication, we may request that you stop these medications prior to surgery. But this should only be done with the approval of your primary doctor. When approved by your doctor, you should stop **aspirin** (or aspirin containing products such as Anacin, Bufferin, Excedrin, and Alka Seltzer) for **10 days** prior to surgery. Even a single 81mg “baby” aspirin thins the blood and can cause extra bleeding. **Xarelto** (rivaroxaban), **Eliquis** (apixaban), **Pradaxa** (dabigatran), and **Plavix** (clopidogrel) should be stopped **3 days** prior to surgery **with the approval of your doctor**. **Coumadin** (warfarin) should be stopped **3 days** prior, as should non-steroidal anti-inflammatory agents such as ibuprofen, Advil, Motrin, and naproxen. Also, vitamin supplements containing Vitamin E, garlic, ginger, ginkgo or fish oil should be stopped **3 days** prior to surgery.

Other prescription medications should be continued as usual.

Some patients may require preoperative antibiotics. Antibiotics are usually given if you have an artificial heart valve or have had a joint replacement in the past two years. Please alert our office prior to your surgery if you will need antibiotics before your surgery.

Transportation: Most patients are able to drive to and from surgery by themselves and do not require a driver. Because our waiting room size is limited, please limit accompanying family members to only one.

Breakfast: We suggest that you eat your normal breakfast on the day of surgery.

Other: Please bring a book, handiwork, laptop, or other device with you. Our office does have WiFi. Please wear loose-fitting comfortable clothing. **Please do not wear makeup, cologne or perfume.**

After Surgery

What can I expect after surgery?

Swelling around the surgery site is very common after Mohs surgery, especially when it is performed around the eyes. This will resolve with time, usually a few days. Infection is unusual. If it does occur, it can be treated with antibiotics. Rarely, nerves are cut while removing your skin cancer. We will discuss with you preoperatively if we feel this may be a problem in your case. Loss of muscle function is rare after Mohs surgery; loss of sensation is more common. There may be numbness to the skin for several months, but this usually resolves with time.

Will I need to come back?

Usually one return visit is needed about one week after surgery. There may be other appointments scheduled to check on the healing of the area. Follow-ups with your referring physician are essential not only to examine the treated skin cancer, but also to monitor your skin for possible new skin cancers.

How can I prevent more skin cancers?

The best protection from skin cancer is avoidance of the harmful ultraviolet rays of the sun. Patients who have developed one skin cancer often develop more at a later time. Protect your skin from further damage by wearing a high SPF sunscreen with UVA/UVB protection, avoiding the sun during the peak hours of the day, and wearing sunglasses and a broad brimmed hat.

If you follow this advice, you can still enjoy a healthy lifestyle outdoors.

Mohs Surgery

An information pamphlet for patients

Consultation Surgery

Date: _____ Time: _____ a.m./p.m.

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1975 Research Parkway, Suite 165
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(719) 574-0310

www.SkinCancerAndDerm.com

Important Reminders:

- DO take your usual medications on schedule unless instructed otherwise.
- DO eat a good breakfast.
- DO dress comfortably.
- DO let us know if you take blood thinners, or take antibiotics before dental work.
- DO read this pamphlet, and ask any questions you might have.
- DO NOT take aspirin or aspirin containing products for ten days prior to surgery (unless instructed by your doctor to continue).
- DO NOT wear makeup or perfume.
- DO NOT take anti-inflammatory agents, such as ibuprofen and naproxen, for three days prior.
- DO NOT consume alcohol 24 hours prior or 24 hours after surgery.



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