

What is Mohs Micrographic surgery?

Frederic Mohs, M.D. developed a new type of surgery to remove skin cancers in the 1930's. Up until the 1980's, Mohs surgeons used a chemical on the skin prior to surgically removing them, and therefore the procedure is sometimes referred to as Mohs Chemosurgery. In the last few decades however, the technique has evolved and now utilizes local numbing injections prior to surgical removal of skin cancers. Removed tissue is mapped and examined microscopically immediately after surgical removal. Therefore, the name has evolved into Mohs Micrographic Surgery.

Will there be a large defect in the skin after the surgery?

The primary goal is to remove all the cancer. Mohs Micrographic Surgery is extremely precise and therefore allows for *tailoring* of a wound to only involve cancerous tissue. The resulting wound size will vary, but will only be slightly larger than the tumor itself was.

Will there be much pain?

Usually the only discomfort during the operation is when the first numbing medicine is injected. There may be moderate discomfort later in the day or during the first night after the surgery, but extra-strength Tylenol and ice compresses are usually quite effective in alleviating the discomfort.

What should I expect on the day of surgery?

After the doctor has answered all your questions, photographs are taken, the skin is cleansed and the numbing medicine is injected. After the area is numb, the tumor is removed. This usually takes only a short time. A temporary dressing is applied and you are returned to the waiting room while the specimen is processed; this often takes 2 hours. If more tumor removal is required, the entire process is repeated. Once the entire tumor is removed, we will discuss what kind of reconstruction, if any, is necessary. Reconstructions are usually performed at that time. The total time for the Mohs and reconstruction may take 4-8 hours, sometimes longer. Once completed, a dressing will be applied and instructions for care explained. You will be given a wound care instruction sheet to assist you.

What is required after surgery?

For most cases, the surgery area is cleaned daily with tap water and then covered with a petrolatum based ointment like Aquaphor or Vaseline. We recommend that you purchase the ointment, along with non-stick 4x4 gauze pads and paper tape to have on hand for bandaging at home after the surgery. It is likely that you will be required to refrain from strenuous exercise for 1-2 weeks after surgery. An appointment for follow-up and possible suture removal in 5-7 days may be scheduled. If you are from out of town, this may be arranged with your local physician. Checkups in three, six and twelve months may also be recommended.

Reconstruction of Surgical Wounds

Our office is a state of the art facility adjacent to a Medicare and State approved Ambulatory Surgery Center where reconstruction of surgical wounds is performed. Since the Ambulatory Surgery Center is adjacent to the office, we are able to remove skin cancer and reconstruct surgical wounds in a maximally efficient, and ultimately convenient fashion.

Surgical wounds are either stitched or left to heal on their own. Many stitched wounds are closed in a simple, elliptical fashion while others require more advanced flaps or skin grafts. These more advanced procedures are reserved for areas where skin laxity is minimal and simple movement of tissue may distort cosmetic features. Dr. Bricca has extensive training, experience, and expertise in reconstructive procedures and will discuss the *pros and cons* of each option prior to determining the best course of action for your wound healing.

Dr. Bricca is an expert in the field of cancer and reconstructive surgery. He has written and published multiple articles and book chapters on these subjects, and has lectured locally, nationally, and internationally on the topics of skin cancer, Mohs Micrographic Surgery, and reconstructive surgery.