

MOHS MICROGRAPHIC SURGERY

Patient Handbook



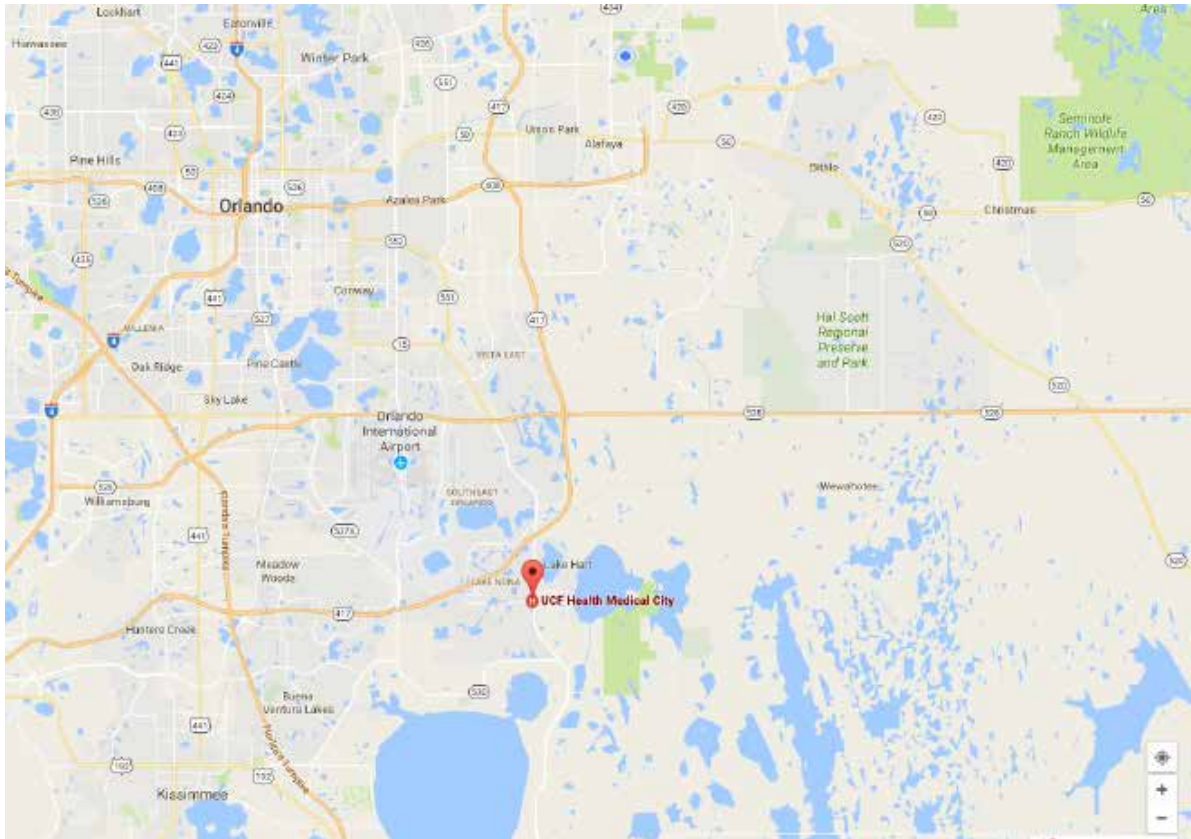
UCF ✦ **Health**

College of Medicine Practice

9975 Tavistock Lakes Blvd., Suite 360
Orlando, FL 32827
(407) 266-3627

Our Office

UCF Health, Medical City Office
9975 Tavistock Lakes Blvd., Orlando 32827
Office is located on the THIRD FLOOR, Suite 360
407-266-4900



You can access our parking lot from both Tavistock Lakes Blvd., and Narcoossee Rd.

There is plenty of on-site free parking.

Directions

UCF Health, Medical City Office
9975 Tavistock Lakes Blvd., Orlando 32827
Office is located on the THIRD FLOOR, Suite 360



Our Medical City office is located in the heart of Lake Nona. It is easily accessible from the 417.

From Daytona Beach

Take I-4 West to 417 South. Take exit No. 22 for Narcoossee Rd. Turn left onto Narcoossee Rd. Our office will be on the right side, about two miles down the road. If you cross over Tavistock Lakes Blvd., you went just a little too far.

From Cocoa

Take 528 West to 417 South. Take exit No. 22 for Narcoossee Rd. Turn left onto Narcoossee Rd. Our office will be on the right side, about two miles down the road. If you cross over Tavistock Lakes Blvd., you went just a little too far.

From Lakeland

Take I-4 East to 417 North. Take exit No. 22 for Narcoossee Rd. Turn right onto Narcoossee Rd. Our office will be on the right side, about two miles down the road. If you cross over Tavistock Lakes Blvd., you went just a little too far.

Mohs Surgery



Your Appointment

Date: _____ Time: _____

Location: UCF Health, Medical City office

9975 Tavistock Lakes Blvd., Suite 360, Orlando 32827

Contact: Mohs Surgery Coordinator, 407-266-4871

Frequently Asked Questions

Can I drive myself?

Your doctor may give you a mild sedative or your skin cancer may be in a location that could make driving difficult. Therefore, it is **necessary** that you arrange to have a companion who is able to drive you to and from the doctor's office (unless told otherwise by our office). If you do not have a driver and one is needed, your surgery may need to be rescheduled.

What can I expect the day of my surgery?

We will try to schedule you early in the morning. The doctor will outline the cancer with a pen and numb you with a local anesthetic. A thin layer of skin is removed and bleeding is stopped with a cautery machine. A nurse will bandage you and you'll be asked to wait in the waiting room while your tissue is examined. This usually takes about an hour. If the tissue reveals there is still cancer, the process is repeated until all the cancerous tissue is removed. This can require several trips to the operating room, depending on the extensiveness of the cancer roots.

Will I be left with a scar?

Yes. Any form of surgery will leave a scar. However, with Mohs surgery your cosmetic results are enhanced because only the skin with cancer is removed, thereby preserving the greatest amount of healthy tissue. Your doctor is sensitive to producing the best possible cosmetic result. Occasionally, we will refer you to a plastic surgeon when their particular expertise is needed.

Should I bring someone with me?

You are welcome to bring someone to keep you company while you wait in the waiting room. This is your preference. However, make sure you have assistance with transportation as noted above.

Will I have pain after the surgery?

Most patients do not complain of pain. If you are uncomfortable, you may take Tylenol for pain, as long as you don't have any known complications with Tylenol. But avoid aspirin or products containing aspirin unless already prescribed by your doctor.

Before Your Appointment

- Don't drink any alcohol 3 days before and after your surgery.
- Take your medications as normal unless specifically told to stop by your doctor.
- If you have a medical condition which requires that you take antibiotics before dental or surgical procedures, let us know so we can arrange for you to obtain these before you arrive for surgery.
- We recommend you eat breakfast the day of your surgery.
- On the morning of surgery, please shower and wash your hair to minimize your risk of a surgical site infection. Don't use lotion or perfumes.
- Most cases will only take a few hours, but more challenging cases can take the whole day. Be prepared by packing snacks, bringing a book and wearing comfortable clothes, including a light jacket.

About Mohs Surgery



Mohs Micrographic Surgery is a highly specialized technique for the removal of skin cancer. The purpose of Mohs surgery is to completely remove all cancerous tissue while preserving as much healthy skin as possible. It offers the highest cure rates (95%-99%). It is especially well suited for skin cancers located on the head and neck, as the technique offers the best cosmetic results by removing only the affected tissue and preserving the greatest amount of healthy tissue. This is achieved by removing thin layers of skin one at a time and examining the skin for remaining “roots” of cancer.

Your Doctor

Mohs surgeons are dermatologists who have performed additional fellowship training to become experts in Mohs micrographic surgery. Fellowship-trained Mohs surgeons are highly skilled in all aspects of this technique, including surgical removal of the tumor, pathologic examination of the tissue, and advanced reconstruction techniques of the skin. All dermatologic Mohs surgery faculty at UCF Health are fellowship-trained and members of the American College of Mohs Micrographic Surgery (ACMS). This official national organization maintains the high level of training and quality of care of this sub-specialty.

Insurance Coverage

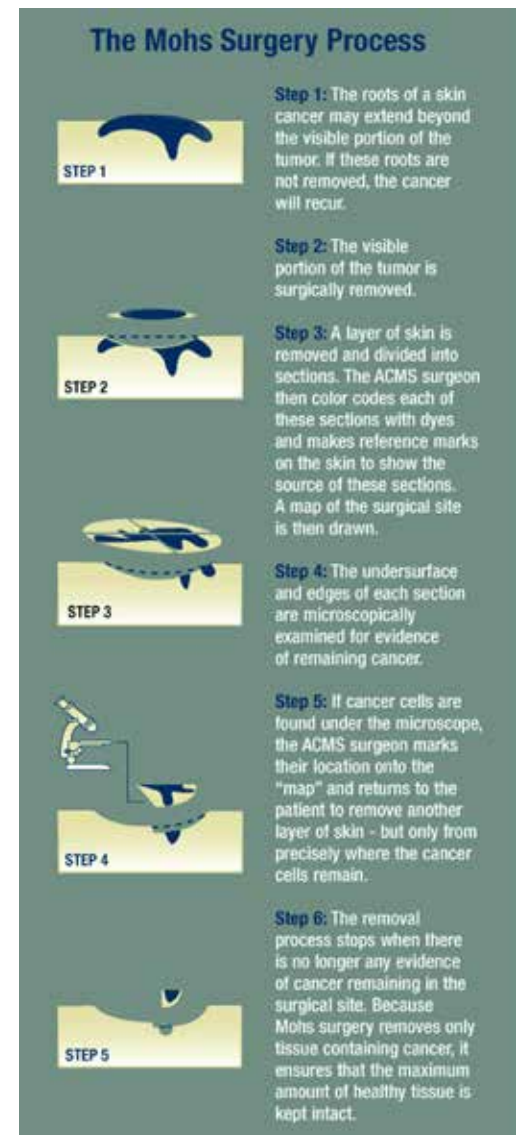
Most insurance policies cover the cost of Mohs surgery. Our billing office staff will verify your insurance coverage prior to your surgery date and notify you with an estimate of your financial responsibility. You may need to contact your insurance company directly about benefits or coverage.

During the Surgery

Your doctor will start by numbing the area using a local anesthetic. Surgery will start by removing a thin piece of skin including the skin cancer. An electric needle and bandages will be used to stop any bleeding. This may take up to 20 minutes.

The removed layer will then be mapped and examined by the surgeon for any evidence of remaining cancer cells. Your doctor will take about an hour mapping and examining the removed layer of skin. During this time, you will be asked to wait in a waiting area. If the removed layer shows evidence of remaining cancer cells, the process will be repeated until the cancer is completely removed. In most cases, surgery is complete in one day. But if the cancer is extensive, a second day of surgery may be needed. The average number of surgical stages is two to three.

Once the cancer is completely removed, your doctor will discuss with you the best way to close the wound. This can include self-healing, stitches, or a skin graft or skin flap. Until the cancer is completely removed, your doctor will not know which method will be used because the final defect cannot be predicted. Your doctor will use the method that will preserve normal functionality and produce the best aesthetic outcome. In most cases we will proceed with the reconstruction immediately. On occasion, special arrangements will need to be made for your reconstruction.



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American College of Mohs Surgery

Preparing For Surgery



Medications

Please discontinue any ED (Erectile Dysfunction) medication 72 hours prior to surgery, but continue all other medications prescribed by your doctor including blood thinners like Coumadin or aspirin.

However, if you are taking aspirin, ibuprofen or herbal supplements without your doctor's orders for a medical condition, please discontinue them 10 days prior to your surgery appointment (supplements would include Anacin, Bufferin, Excedrin, Alka Seltzer, Percodan, Advil, Aleve, Motrin, Fish Oil, Oral Vitamin E & Ginko Biloba).

You may take Tylenol if needed for pain.

Alcohol

Alcohol will promote bleeding, so avoid alcoholic beverages 48 hours before surgery.

Day of Surgery

On the morning of surgery, please bathe or shower and wash your hair to minimize your risk of a surgical site infection.

Please avoid wearing make-up, perfume, nail polish, and jewelry.

We recommend you eat breakfast and bring snacks with you to your appointment, as the process can take several hours.

Bring a light jacket as the clinic can be quite chilly.

Bring reading material or something to do while waiting between surgery sessions. Our waiting room offers TV, water and reclining chairs for your comfort.

If you elected to have a sedative, or if your skin cancer is in a location that might impair your ability to drive, you will need to make transportation arrangements for getting home from your surgery.

After Surgery



Bleeding

Great care will be taken to seal all blood vessels during surgery and a pressure dressing will be applied before you leave. These two measures should prevent any significant bleeding. Occasionally post-operative bleeding occurs. If bleeding occurs, place clean gauze on the area and apply pressure for 15 minutes without peeking at the wound. After 15 minutes of constant pressure, you can remove the gauze. If the bleeding has not stopped, apply another clean piece of gauze and apply pressure for another 15 minutes. If bleeding persists, contact your doctor.

Complications

There are some minor complications that can occur after Mohs surgery. You may notice a small red area around your wound. This is normal and does not indicate infection. However, if the redness is spreading to a larger area or if you develop a fever, or have chills, please notify us.

Some drainage is normal and should improve each day. If you notice an increase in drainage, this can indicate an infection and you should notify us immediately.

Itching and some redness are normal and are usually a reaction to the tape used for your bandage. When this occurs, you can re-apply the bandage using a non-allergenic tape and notify us during your next visit.

Some bruising and swelling are common, especially around delicate areas such as the eyes. You should see this reduce over the four to five days following your surgery.

Aesthetics

Although every effort will be made to offer the best possible cosmetic result, you will be left with a scar. The scar can be minimized by the proper care of your wound. We will discuss wound care in detail with you.

Follow-Up Visits After Surgery

If your surgical wound has been reconstructed, you will be asked to return for suture removal and usually once more to judge wound healing. Occasionally revision of a scar or graft may be required, necessitating more visits. These issues will be reviewed at your post-operative visit(s). Our goal is to return you as soon as possible for follow-up with your own dermatologist for long-term surveillance for skin cancer.

**We have a doctor on-call
24 hours a day.**

**Call 407-266-3627, and if
outside of normal office
hours, the answering
service will connect you
to our on-call physician.**

After Surgery



What Happens After The Wound Heals?

You may experience a “tight” sensation as your wound heals. This is normal. With time, you will feel this less and less. Because tumors usually involve sensory nerves, you may have some degree of numbness at the surgery site. It is normal to take a year, or even two, before feeling returns to normal, or near normal levels. Sometimes the area stays numb permanently. Rarely, motor nerves may be involved resulting in temporary or permanent motor nerve damage.

The new skin that grows over the wound contains many more blood vessels than the skin that was removed. This results in a red scar, and the area may be sensitive to temperature changes (such as cold air). This sensitivity improves with time, and the redness also gradually fades.

It is normal to experience an itching sensation as the new skin grows and heals. You can apply Vaseline to help relieve the itching, but do your best not to scratch.

How Often Must I Return For Follow-Up After The Wound Has Healed?

After the initial follow-up period with your doctor, you should plan for regular check-ups with a dermatologist at least annually for 10 years. The first year is vitally important, as experience has shown that if there is a recurrence it will usually will be within the first year following surgery.

Also, studies have shown that if you had one skin cancer, you will likely develop others in the years ahead. We recommend you be seen by a dermatologist at least once per year for the rest of your life. If you notice any suspicious areas on your skin, have them checked out by your dermatologist.

After-Surgery Tips

- Cover up when in the sun. Protect your skin and surgery site by covering up with a hat or clothing. Also, use sunscreen.
- Avoid extremes of temperatures as this can cause discomfort.
- Use Vaseline to help relieve itching of the wound as it heals.

About Skin Cancer



What Is Skin Cancer?

Cancer is a tissue that grows at an uncontrollable and unpredictable rate. The types of cancer treated with Mohs surgery include basal cell carcinoma, squamous cell carcinoma, and other skin cancers. Skin cancer begins at the surface of the skin and grows roots downward. What you see of the cancer is usually only the “tip of the iceberg.”

Why is Skin Cancer Dangerous?

Skin cancer can spread to other vital parts of the body, causing damage to those areas and even sometimes causing death. Skin cancer does not go away on its own. Even if the spot appears to “heal over,” if left untreated it can come back bigger, and with deeper roots. While removal of the skin cancer is not an emergency, it should be removed within a month or two of diagnosis.

What Causes Skin Cancer?

Though the exact cause is unknown, researchers agree that several factors, of which the most important is sun exposure, interact together to make some people more susceptible. People with very fair skin, light or red hair, and blue eyes get skin cancer more often. Heredity seems to play a part. Other possible causes include X-rays, burns and certain chemicals.

How is Skin Cancer Treated?

There are a variety of successful methods of treating most skin cancers. These include scraping and burning, cutting out and sewing up, X-ray treatment, and cryosurgery (freezing). About nine out of 10 cancers treated by these methods will be cured. It is that 10 percent of people who have recurrent tumors and unusual tumors who may need Mohs surgery. It is important to emphasize that no technique, including Mohs, can promise 100 percent cure. However, of all the available techniques for removing skin cancer, Mohs surgery preserves the greatest amount of healthy tissue and has the highest chance of curing the patient.



Dermatology Services Available

- ◆ Evaluation & Management of Diseases of the Skin, Hair and Nails
- ◆ Acne Treatment
- ◆ Botulinum toxin (Botox®, Dysport®)
- ◆ Skin Cancer Treatment
- ◆ Chemical Peels
- ◆ Dermal Fillers
- ◆ Eczema and Atopic Dermatitis Treatments
- ◆ Genital Wart Treatment
- ◆ Keratoses Treatment
- ◆ Laser Treatment
- ◆ Moles and Birthmark Evaluation and Treatment
- ◆ Psoriasis Treatment
- ◆ Rosacea Treatment
- ◆ Scar Revision
- ◆ Skin Cancer Screening & Treatment
- ◆ Split Earlobe Treatment
- ◆ Varicose Veins and Spider Veins Treatment
- ◆ Wart Removal

Accepted Insurance Plans

UCF Health accepts most major insurance plans. If you have questions about your insurance coverage, please call and speak to one of our insurance specialists.

- Aetna
- AvMed
- Blue Cross/Blue Shield (Blue Cross Select is not accepted.)
- CHAMPUS/CHAMPVA
- Cigna
- Fortified Provider Network
- Medicaid
- Medicare
- Multiplan
- PHCS
- Tricare Standard
- Tricare for Life
- Tricare Prime
- United Healthcare
- USA MCO
- Zelis

UCF ◆ Health

College of Medicine Practice

LAKE NONA
MEDICAL CITY

UNIVERSITY BLVD.
EAST ORLANDO