



About Your Mohs Surgery

Key Messages

- Mohs surgery is one of the most successful surgical treatments for removing skin cancer.
- The goal of the surgery is to remove all of the cancerous tissue (also called a “tumor”) while leaving as much of the healthy tissue as possible.
- The suspicious-looking area you see on your skin is sometimes only a small part of the tumor.
- The time in surgery is unpredictable. Some tumors may take 1 to 2 hours to remove, while others may take 10 hours or more. The average skin cancer requires 2 to 5 hours for removal and closure. Every person’s procedure is different. **You should be prepared to spend all day at the clinic.**
- The reconstruction method used may be very simple or it may be more complicated than you expect. This will be discussed with you after the tumor is removed.
- A driver may be required if surgery involves the areas around your nose or eyes. If no one comes with you, have someone on standby.
- Typically, it is important to eat a normal breakfast and take any usual morning medications.
- If you are scheduled to have reconstruction performed by another specialist while you are under general anesthesia, you should NOT eat breakfast. Talk to your health care provider before surgery day to learn more about preparing for surgery.
- You may wish to take time off work and/or change your daily activities as your skin heals.

Read this material before your procedure. If you have questions after reading this, talk with

your healthcare provider.

Preparing for Surgery

Do not use tobacco

To help your skin heal, if you smoke or use other tobacco products (snuff, chew, cigars, etc.), do not use tobacco for at least 3 weeks before and after surgery. Smoking, especially, interferes with healing. Ask your health care provider for patient-education materials about quitting smoking.

Consider your appearance and care needs

How you look after surgery will depend on many factors, including the location and size of the skin cancer, the number of tumors removed and the type of reconstruction done.

The more surgery you have, the more healing you will need. This may impact your return to daily work or other activities. Although you won't know before surgery how large of a wound you will have, if applicable, you may want to talk to your employer or school about the possibility of a change in your schedule after surgery.

For the first 2 weeks after surgery, your appearance will be different.

- For at least 1 week after surgery typically you will have a dressing (bandage) over the surgical area. Ask your health care provider how often you should clean your wound and change the dressing. For most people, this care is twice daily.
- For about 3 to 14 days after surgery the surgical area may be swollen.

Plan for time off

The more surgery you have, the larger the wound may be and the more healing you may need. This may impact your return to daily work or other activities.

If you have stitches (sutures) on your face, you should consider whether this would have an impact on your ability to do your usual job or daily activities.

For some jobs, such as those involving "desk work," you may decide to return to work soon after surgery. For other jobs, such as those involving meeting people or doing heavy lifting, you may wish to consider time off work. If having swelling and a bandage on the surgical area would be a problem, you may want to plan for some time off.

Your health care provider will not be able to tell you before surgery how large the wound will be. After your surgeon completes the reconstruction, talk to him or her about whether you need work restrictions.

Clear any travel plans

In most cases, you will need to have stitches removed 5 to 7 days after your surgery. Unless absolutely necessary, do not plan any trips during the week after surgery.

Buy the supplies you'll need after surgery

Typical supplies needed for wound care at home are:

- Cotton swabs
- Petroleum jelly
- Non-adhesive wound dressing (for example, Telfa™)
- Paper tape (for example, Micropore™)

If you do not have the chance to buy these supplies before surgery, they may be purchased at your local pharmacy. Most people need to clean their wound beginning 24 hours after surgery. Your wound-care instructions may be different depending on the type of reconstruction you have. Talk to your health care provider about your wound-care needs before you leave.

Make plans for taking your medications

Before surgery, tell your health care provider about any drug allergies you have and about any medications you are taking, including prescription and over-the-counter medications, vitamins, herbal and other supplements.

If you take blood-thinning medications: Blood-thinning medications affect clotting and bleeding. **For your upcoming Mohs surgery, continue to take your blood-thinning medications.**

Some examples of generic and brand name medications that affect blood thinning are:

- Warfarin (Coumadin™, Jantoven™)
- Clopidogrel (Plavix™), prasugrel (Effient™)
- Dabigatran etexilate (Pradaxa™)
- Heparin, enoxaparin (Lovenox™), dalteparin (Fragmin™)
- Aggrenox™, cilostazol (Pletal™)
- Aspirin, aspirin-containing products
- Ibuprofen (Advil™, Motrin™), naproxen (Aleve™, Naprosyn™)

Day of surgery

If you take prescribed medications, continue to take those medications unless instructed otherwise.

Plan to bring something to do

There is “down time” during surgery, when your surgeon is in the nearby laboratory (lab) examining the tissue (cells) under the microscope. You are expected to stay in the immediate surgical area. You may bring a tablet, book, or other activity to help pass the time.

Bring a Driver, if needed

A driver may be required if surgery involves the areas around your nose or eyes. Your driver can leave to get you food if needed. If no one comes with you, please have someone on standby.

In addition, in case you are sedated, to help you relax during surgery, you will need someone to drive you home.

Get ready the night before surgery

- Wash your hair the night before or morning of surgery. You will be asked not to get the incision wet for 24 hours after surgery.
- Try to get a good night’s sleep.
- ***Give special attention when the cancer is on your face***
- On the morning of surgery, wash your face thoroughly.
- Do not apply any makeup or lotion after you wash.
- Wear clothes that button down the front and do not have to be pulled over your head to remove.
- ***Eat before surgery. If you are not planning to have general anesthesia, eat your normal meal(s) on the day of surgery. This will help you feel more comfortable during surgery.***

Surgery Day

Mohs surgery is an outpatient procedure. This means you do not have to stay overnight.

The surgery typically takes from 1 to 10 hours (or more) depending on the size and number of tumors and on the method of reconstruction that’s appropriate for you. (See “Closing the Wound.”)

Most Mohs surgeries are finished in 2 to 5 hours.

Preparing for surgery: anesthesia and sedation

Typically, the health care provider uses a local anesthetic injected by needle into the surgical area. This medication may sting for 10 to 15 seconds as it numbs the skin and nearby tissue.

The surgeon may recommend that you take a mild sedative pill to help you feel calm during the procedure. This medicine may make you feel sleepy and sometimes you may fall asleep and/or forget some details of the day. But, for the most part, you are awake. You do not need a breathing tube for this surgery.

If you are considering sedation, talk to your provider before the day of your surgery about any precautions, risks and complications.

Discharge from the Clinic

After surgery, a member of your health care team gives you instructions about how to care for the wound. Read those instructions carefully and be sure to ask questions if necessary.

Your friend or family member should drive you home. You should rest for the remainder of the day. Unless instructed otherwise by your health care provider, continue taking your usual medications after surgery. There is no restriction on what you eat after surgery.

Risks and Complications

Risks and complications associated with Mohs surgery may include but are not limited to the following:

- *Mild pain at the surgical site* — This pain is usually managed with acetaminophen, such as Tylenol™.
- *Bleeding* — Excessive bleeding under a wound that has been stitched is called a hematoma. If this occurs, it may delay healing and increase the chance of infection.
- *Infection* — Wounds that become infected usually require antibiotic treatment.
- *Loss of nerve and muscle function* — Rarely, surgery may result in damaged (impaired) nerve or muscle function. If this occurs, it may be temporary (8 to 12 months or more) or it may be permanent.
- *Poor healing* — In some instances, the wound created by the surgery may heal slowly or not as well as hoped. If this occurs, additional surgery may be required.
- *Swelling* — Surgery typically results in swelling. The swelling usually decreases slowly as you heal. For most typical wounds, the swelling is gone within a week.
- *Scarring* — Procedures used to remove skin cancer can cause scarring. Every effort is made to help minimize scarring.

If any of these complications arise for you, contact your surgeon.

Care Following Surgery

Antibiotic prescription

Your surgeon may prescribe an antibiotic as a precaution to avoid infection in the wound. Follow all instructions for taking this medication.

Prescription pain medications

After surgery, you may experience pain in the surgical area. While you are at the clinic, you may be asked to rate the pain. The amount and time frame for pain are different for each person.

Your health care provider may give you prescription pain medication to help manage your discomfort. Prescription pain medications can cause unwanted side effects, such as constipation, light-headedness, dizziness, and nausea. Long-term use of narcotic medication when there is no pain can lead to dependence.

Use prescription pain medications only as long as needed to manage your discomfort. If your pain is not managed with the medication you are taking, contact your health care provider. He or she will work with you to reduce the pain.

While you are taking prescription pain medications, **do not:**

- Drive or operate motorized vehicles or equipment.
- Drink alcoholic beverages.
- Make important decisions or sign legal documents.
- Assume responsibility for anyone who depends on your care.

Talk to your health care provider before beginning new medications while you are taking prescription pain medications.

It is important that you take the prescribed medications exactly as instructed. Talk to your health care provider about how to slowly transition to other pain-control methods. This may include over-the-counter medications.

The discomfort caused by most Mohs-surgery wounds can be controlled by acetaminophen.

When to Call Your Surgeon

Contact your surgeon if you experience any of the following:

- Fever of 100.4 degrees Fahrenheit (38 degrees Centigrade) or higher
- Bleeding not controlled by putting pressure directly on the wound, using a clean cloth or gauze
- Pain not relieved by medication
- Increased swelling around the wound
- Reopening of the wound
- Oozing (discharge) from the wound
- Increased redness and warmth around the wound

Restrictions

To help with healing, it will be important for you to limit some activities:

- Do not drink alcohol for 3 days after surgery, and do not use tobacco for at least 3 weeks after surgery. These can slow the healing process, cause bleeding or both.

- Do not bend over if the surgery was done on your face. This can cause blood to rush to your face and may cause bleeding from the wound.
- Do not participate in high-energy athletic activities while stitches are in place, usually for 1 to 2 weeks.
- Do not lift anything heavier than 10 pounds for 1 to 2 weeks.
- Do not vacuum for 1 to 2 weeks. This simple activity uses some of your major muscle groups, increases your heart rate and could increase the chance of bleeding at the wound site.
- Do not put your surgical area under water until your stitches are removed (usually done within 1 to 2 weeks). This includes bathing, swimming and using a hot tub. You may shower after 24 hours.

Healing time

Healing time depends on the size of the wound and the method used to close it.

When the surgeon closes the wound with stitches, this part of the healing process typically takes about 1 to 2 weeks.

When stitches are not used, healing can take 2 to 8 weeks or longer.

After 2 months, most wounds appear thick, tight, rubbery, and red. Typically, the scar will soften naturally after this time.

You should notice most of the improvement in the skin's appearance during the first 6 months.

Healing from the surgery continues under the skin for 1 to 2 years.

Immediate

Keep all follow-up appointments. These appointments may include removal of the stitches.

Long-term

Once you have had skin cancer — even one tumor — you are at a higher risk than the general population to develop more skin cancer. This may be the same type of cancer on a different part of your body or another kind of skin cancer. Full-body skin examinations are recommended at least annually. Ask your surgeon how often he or she recommends this for you.

For More Information

If you have questions after reading this information, call your dermatologist. Our Mohs team is located at our **East Wichita location** on the **second floor**.

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