Why do I need Mohs surgery?

Mohs surgery offers the highest cure rate among treatments for skin cancer. It is considered the "gold standard" for certain forms of skin cancer in specific locations, especially on the face. The following are *some* reasons your physician may have recommended Mohs surgery.

- Your skin cancer has developed on areas where preserving cosmetic appearance and function are important, or
- Your skin cancer has recurred after previous treatment or is likely to recur, or
- Your skin cancer is located in an area of scar tissue, or
- Your skin cancer is large, or
- Your skin cancer has ill-defined edges, or
- Your skin cancer is fast growing or has aggressive features

What is Mohs surgery?

The Mohs procedure involves surgically removing skin cancer layer by layer and examining the tissue under a microscope until healthy, cancer-free tissue around the tumor is reached (called clear margins). Mohs surgery is unique and very effective (up to 99%) because of the way the removed tissue is microscopically examined, evaluating **100% of the surgical margins**. A Dermatologist trained in Mohs surgery is the only type of specialist trained to perform this technique. The pathologic interpretation of the tissue margins is done on site by the Mohs surgeon, who is best able to correlate any microscopic findings with the surgical site on the patient.
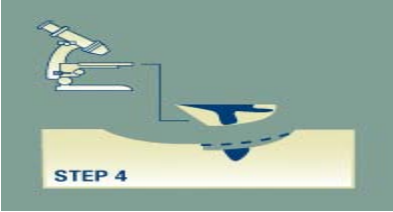
Advantages of Mohs surgery include:

- Ensuring complete cancer removal during surgery, virtually eliminating the chance of the cancer growing back
- Minimizing the amount of healthy tissue lost
- Maximizing the functional and cosmetic outcome resulting from surgery
- Repairing the site of the cancer the same day the cancer is removed, in most cases
- Curing skin cancer when other methods have failed

What should I expect the day of surgery?

You will receive local anesthesia around the area of the tumor, so you are awake during the entire procedure. After the area has been numbed, your surgeon removes the visible tumor, along with a thin layer of surrounding tissue. A technician then prepares this tissue and puts it on slides for your surgeon to examine under a microscope. If the surgeon sees evidence of cancer around the outer edges of the removed tissue, he or she takes another layer of tissue from the area where the cancer was detected. This ensures that only cancerous tissue is removed during the procedure, minimizing the loss of healthy tissue. Your surgeon repeats these steps until all samples are free of cancer.

Although there are always exceptions to the rule, most tumors require 1 to 3 stages for complete removal. The processing time between each stage when a portion of tissue is removed can take on average 1 hour but can be longer depending on the size of the tumor and other factors. _Be prepared to spend the whole day in our office_. The goal of the Mohs surgery is to remove all of the unhealthy tissue and repair the skin on the same day. Sometimes this can take all day. You should bring food, something to read or work on while you are waiting.

After the skin cancer is removed completely, the surgeon will discuss with you the possible options for reconstruction which may include closing the area side to side with stitches, performing a flap or skin graft,

leaving the wound open to heal on its own or if necessary refer you to another reconstructive physician. You will have a bandage in place that must stay dry for 24 hours. You will also be limited in activity for 1-2 weeks after the surgery. This usually means no heavy lifting, tennis, golf, swimming etc during this time. The day of surgery eat a normal breakfast, take all of your medications, wear comfortable clothing and plan to take the entire day off from work or activities. Please call our office if you have any questions prior to your surgery.

STEP 1	The roots of a skin cancer may extend beyond the visible portion of the tumor. If these roots are not removed, the cancer will recur. The surgery starts with the Mohs Surgeon examining the visible lesion and planning what tissue to remove. The patient then receives local anesthesia, and the Mohs surgery begins.
STEP 2	The surgeon removes the visible portion of the tumor using careful surgical techniques.
STEP 3	The surgeon next removes a deeper layer of skin and divides it into sections. With the help of technicians, the surgeon then color-codes each of these sections with dyes and makes reference marks on the skin to show the source of the sections. A map of the surgical site is then drawn to track exactly where each small portion of tissue originated.
STEP 4	In a laboratory, the surgeon uses a microscope to examine the undersurface and edges of each section of tissue in search of evidence of remaining cancer.
STEP 5	If the surgeon finds cancer cells under the microscope, he or she marks their location on the "map" and returns to the patient to remove another deeper layer of skin — but only from precisely where the cancer cells originated. This method ensures that the Mohs surgery results in the smallest scar possible. The removal process stops when there is no longer any evidence of cancer in the surgical site. Because Mohs surgey removes only tissue containing cancer, it ensures that the maximum amount of healthy tissue is kept intact. (Source: http://www.skincancermohssurgery.org/mohs-surgery/step-by-step-process.php)