

Randolph Dermatology

AND MOHS MICROGRAPHIC SURGERY

MOHS Micrographic Surgery and Excision Post-Operative Instructions

Day of the excision or Mohs Surgery:

- Keep the surgical site dry and protected.

Instructions for all subsequent days until you return to the office:

- Soak the dressing in the shower and gently remove the dressing after washing your hands.
- Cleanse the surgical site with one of the following: hydrogen peroxide, white vinegar (1 tablespoon in 1 pint of water) or Hibiclens (chlorhexidine) using fresh gauze or Q-tips. If using Hibiclens, do not get it in your eyes or ears. Hydrogen peroxide works particularly well to dissolve any crusts that have formed around the surgical site but do not forcefully pick off any adherent crusts - this could cause bleeding. Finally, use only soap and water close to the eyes.
- Apply vaseline or other ointment, such as mupirocin, Bacitracin, Polysporin, or Neosporin to the surgical site with a fresh Q-tip. Keep your surgical site moist because moist wounds heal significantly faster than dry wounds.
- Finally, apply a two layer dressing by placing a non stick pad directly to the skin, and then cover this pad with first-aid gauze. Telfa is a brand of nonstick pad commonly used in dermatology clinics. Finally, secure the dressing with first-aid cloth tape. If the surgical site is small enough, and nothing is draining from it, you may apply a large adhesive bandage over the wound instead of a two-layer dressing.

Special Directions:

- Do not smoke when you go home until wound healing is complete. Smoking deprives the surgical site of oxygen, which is needed for healing.
- Apply an ice pack as time allows to reduce discomfort, swelling, bleeding and bruising.
- If you have a normally functioning liver, Tylenol is typically preferred for postoperative discomfort because other pain medicines increase the risk for bleeding. Most patients with a healthy liver and kidneys can take up to two extra-strength Tylenol every four hours, as needed. Consider taking Tylenol upon arriving home, even before the numbing medicine wears off.
- If the dressing gets wet or falls off, replace it as described above.
- If you bleed through your bandage, fold up some first-aid gauze pads and press them firmly onto the surgical site for twenty minutes. After twenty minutes, check the wound. If it is still bleeding, repeat the firm application of gauze for another twenty minutes. If the site is still bleeding after the second application, call your surgeon or go to the closest emergency room.

- If you develop severe pain or swelling around the surgery site, you could be developing a hematoma, which is a collection of blood under the skin. Please call your surgeon promptly because you may need treatment.
- If you develop a red, itchy rash at the surgery site, you may be developing a skin allergy to the antibiotic ointment or dressing. Consider stopping the use of the antibiotic ointment and use Vaseline only, which will not cause a skin allergy.
- If you develop pain, redness, swelling, warmth, pus or foul odor at the surgery site you could have an infection. Call your surgeon immediately because you may need oral antibiotics.
- If your surgery was on your face or head, try to keep your head elevated for the next forty-eight hours. Bending down causes blood to rush to your head and may increase the likelihood of bleeding. Also, elevate your head on two or three pillows at night if possible.
- If your surgery was below your knee, expect some redness and swelling to persist for several weeks. You can reduce redness and swelling by elevating your legs when sitting. A seat cane, available at surgical supply stores, may be useful for this purpose, especially when you plan to leave your house. Ice packs will also help reduce discomfort, redness and swelling. Finally, an excessive amount of walking and standing increase pain, redness and swelling, so please take it easy.
- If your surgery was around your mouth, eat only soft foods (for example, rice, yogurt, apple-sauce and so forth) for three days after the procedure. Opening your mouth too wide or stretching your lips while eating something large or firm can cause bleeding.
- Avoid strenuous exercise for approximately three weeks after the procedure. Activities that increase your pulse or blood pressure could cause bleeding or pull apart your stitches.
- Wear only clean clothes over the surgery site to decrease the risk for infection.
- If the surgical site was left to heal from the inside out without sutures, you must cleanse the wound and change the dressing daily until the site is completely healed over. Healed wounds are pink and smooth. They are not covered with scabs, and they do not leak fluid. Most wounds require a few weeks to heal, but wounds below the knee may take significantly longer because circulation in this area is relatively poor. Finally, the scar may appear light-colored compared with surrounding skin.
- Surgical scars tend to look increasingly better over the course of an entire year, even with no treatment. Nevertheless, after suture removal, you may consider treating the scar to improve its appearance. For example, massaging the scar with your fingers periodically throughout the day for several months may help soften and flatten the scar. Silicone sheets also soften and flatten scars. These sheets are available at pharmacies and are taped to the scar at night and removed in the morning. Use them for four to six months for best results.

If the scar's color bothers you, a pulsed dye laser can remove the pink color. Dermatologists can also treat puffy scars with corticosteroid injections, which help them settle down. Finally, the doctor can polish your scar with a procedure called dermabrasion.