

Frequently Asked Questions

What do I need to do to prepare for surgery?

We recommend that you eat breakfast and bring a sack lunch or a snack. We do offer some light snacks and drinks, but if you want something specific or more substantial you are welcome to bring something with you. You will need to remain in the office until your surgery is complete, even if your surgery goes through the lunch or dinner hour. Take regularly prescribed medications the morning of the surgery. Aspirin and aspirin-containing medications should not be taken 14 days prior to surgery, unless you are a cardiac or stroke patient and your doctor prescribed the aspirin.

What do I need to bring with me to surgery?

On the day of your surgery, you must be accompanied by a family member or friend. We ask that you limit this to one person due to the limited space in our waiting room. We also recommend that you arrange for a ride home following your surgery and do not plan on driving yourself home. Feel free to bring some reading material or entertainment for your use while you wait. A television and protected Wi-Fi are available in our surgery lounge.

It looks as if it was removed with the biopsy, must I have surgery?

Yes. Sometimes after the biopsy it looks as if the skin cancer went away. This is not the case. Normal-looking skin just heals over it; the roots are still left behind and continue growing. Once you cut into the skin and examine it, there is still cancer there. If this is not treated, it will continue to grow and become more locally destructive. The lesion is almost always larger underneath the skin than what can be seen on the surface, which is why it is examined under a microscope during the Mohs surgery process.

Will I have pain or bruising after the surgery?

Most patients do not experience excessive pain following surgery. We recommend that you take Tylenol and Ibuprofen if you do have any pain or discomfort. You may have some swelling or bruising around the wound, which typically will last only a few days.

Will the surgery leave a scar?

Dr. Rkein is fellowship trained in advanced facial reconstruction and will always do everything possible to maximize the cosmetic outcome once the cancer is removed.

Will I have any limitations after surgery?

No heavy lifting, no exercising, no strenuous activity that may raise your blood pressure, and no swimming or hot tubs for up to 2 weeks after your surgery. The length of time for these limitations varies depending on the extent and location of your surgery. The Mohs staff will be able to give you more detailed, individualized instructions before you go home the day of surgery.



ALI RKEIN, MD

Board Certified & Fellowship-Trained

Dr. Rkein is a board certified dermatologist and fellowship-trained Mohs micrographic and reconstructive surgeon. With his extensive training, he is committed to providing patients with the highest quality dermatologic and surgical care, utilizing the most recent medical advances.



Excellence In Dermatology™
FELLOW

Diplomate of the the American Board of Dermatology and the American Board of Pathology
Fellow of the American Academy of Dermatology and the American Society of Dermatopathology



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Mohs Surgery



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What is Mohs micrographic surgery?

Dr. Frederick Mohs developed Mohs micrographic surgery at the University of Wisconsin; It is a state-of-the-art, extremely accurate method of removing skin cancer.

How effective is Mohs surgery?

Mohs surgery is the most advanced, precise method of removing skin cancer. It has a cure rate of up to 99%, as compared to a cure rate of 85% to 92% for standard skin cancer surgery. Mohs surgery is the gold standard of treatment for skin cancer.

What are the advantages of Mohs surgery?

You can put your mind at ease knowing that in addition to providing you with the highest cure rate possible, the Mohs procedure removes the least amount of healthy skin compared to other surgical techniques. Conventional surgery involves removing up to 1/4 inch of the normal-appearing skin all the way around the skin cancer to increase the chances of cure. The immediate tissue processing and precise mapping done with Mohs surgery makes this unnecessary. This means that the defect (hole) left after removing the cancer leaves a smaller scar, and provides you with the best outcome.

THE PROCESS

The roots of a skin cancer can extend beyond the visible portion of the tumor. The Mohs process removes the roots of the cancer to minimize the risk of recurrence.

1. The visible portion of the lesion is surgically removed.
2. The removed tissue is cut into sections and is examined under a microscope. If cancer cells are found under the microscope, the surgeon removes another layer of skin, but only from precisely where the cancer cells remain.
3. This process is repeated until no cancer cells are visible under the microscope from any edge of the removed tissue.

Each time this process is repeated it is called a "stage" of the Mohs procedure. Most cases are cleared in one to two stages.

A video made by the American College of Mohs Surgery is available on our website that further explains the Mohs process.



WHAT IS GOING TO HAPPEN THE DAY OF SURGERY?

Arrival: You will arrive at the clinic and check in with the receptionist. One of the Mohs assistants will greet you and bring you into the surgery room. Your companion will be directed to wait for you in the surgery lounge.

Preparation: The Mohs assistant will review a consent form with you and take your pulse and blood pressure. Dr. Rkein will be in to greet you and answer any questions before surgery begins.

Surgery: Dr. Rkein will mark and confirm the site with you. The area to be treated is cleansed with a disinfectant solution and a local anesthetic is injected to numb the area. The only discomfort you should feel is a slight burning sensation during the injection. At each stage of the process, additional anesthetic is injected. Once the area is numb, a thin layer of tissue will be excised. Bleeding will be stopped with electric cautery, a dressing will be applied and you will return to the surgery lounge to wait for your results.

Waiting / processing: While you wait, the tissue layer is being processed and examined underneath a microscope to look for residual cancer cells. This will take approximately 1-1.5 hours per stage.

Findings:

- If residual cancer cells are found, additional surgery to remove them will be performed and another waiting period will be necessary.
- If the area shows no residual cancer cells, we will discuss recommendations for reconstruction.

Reconstruction: Dr. Rkein is trained in reconstructive procedures and will use an individualized plan of repair that will give you the best possible functional and aesthetic outcome.

Bandage changes / wound care: A pressure bandage will be placed on the wound and will need to stay in place for 24-48 hours. At the time of your surgery you will be instructed on how and when to change your bandage and when to return to have your sutures removed.

