

Important information about your Mohs surgery

Department of Dermatology

Information for Patients

Produced: January 2024

Review: January 2027

Leaflet number: 1469 Version: 1

We look forward to welcoming you to Clinic 3 in the Balmoral Building, Leicester Royal Infirmary, for Mohs Surgery.

Please see the leaflet Mohs micrographic surgery for more information on the procedure, benefits and risks. You were given this at your pre-assessment appointment or it is available here: www.skinhealthinfo.org.uk/condition/mohs-micrographic-surgery/

What will happen on the day?

You will be seated in a waiting room for our Mohs patients. There is a toilet nearby. You will be able to keep any valuables with you at all times.

We will give you coffee / tea and a light lunch.

How to prepare yourself

- Please wear a collarless shirt / top or loose top and not your smartest!
- Please do not put on any makeup/ foundation that morning.
- You are likely to be in the department all day. There are times when you will have to wait for over 2 hours whilst the tumour we have removed is being examined. Bring some reading material and / or your smartphone to pass the time.
- If you have a wound dressing near your scalp after the procedure you will not be able to wash your hair for a few days. You may want to wash your hair the night before your appointment.
- We strongly advise that a relative / friend takes you home rather than you driving yourself or taking public transport.

**Health information and support is available at www.nhs.uk
or call 111 for non-emergency medical advice**

Visit www.leicestershospitals.nhs.uk for maps and information about visiting Leicester's Hospitals
To give feedback about this information sheet, contact InformationForPatients@uhl-tr.nhs.uk

- It is best not to plan to do any vigorous activity for at least a week after the procedure.
- If you are a smoker, it is very important not to smoke for a week before and 2 weeks after the operation. Smoking delays the healing time and may result in a thicker scar. It may even result in a skin graft or skin flap failing.

We know that having any surgery can be worrying, especially under local anaesthetic. Let us know when you arrive if you are feeling very nervous. We will do our best to make the day as pain free as possible. Our nurses will be available if you need anything while you wait. We will of course answer any questions that you might have before we start the procedure.

How your wound may be closed after Mohs surgery

After removal of your tumour, the wound will need closing. We will do this on the day of your procedure. The surgeon will discuss with you the best way to close the wound. Your wound will be closed in 1 of the following ways.

Closing a wound directly

This just means that the skin edges are stitched together gently without putting too much tension on the nostrils, eyelids or other areas of the face.

Closing the wound using a skin graft

- The skin graft is normally taken from another area on your face or neck, such as just in front of your ear. It is chosen to match as best as possible the area of missing skin. The place where the skin graft is taken from is closed directly. This means there is a thin scar which is usually not very noticeable. The skin graft is stitched into the wound.
- If you have a skin graft, you will have a dressing on for a week. Then the dressing will be removed by us to check that the graft is looking healthy. You should not need any more dressings.
- Skin grafts can give very acceptable results but sometimes the patch of skin is paler in colour than the surrounding skin. Sometimes the graft does not take and then the wound will normally be left to heal on its own. This may result in a more noticeable scar.

Closing the wound using a skin flap

- This is where the skin is turned into the wound from a nearby area, where the skin is not as tight, and there is a good colour match for the missing skin.
- The nearby area is stitched together directly.
- The flap is sewn into the wound.
- If you have a skin flap, you will have a dressing on for a week. The dressing will be removed by us to check that the flap is looking healthy. You should not need any more dressings.
- Sometimes the surgeon may decide that a type of flap called an **interpolation flap** is needed. If that is the case, you will need another smaller procedure under local anaesthetic after 3 weeks. You will have a dressing in place for 3 weeks.



These options will be discussed with you at the time of surgery and the aftercare explained, including follow up.

You may have dissolving or non-dissolving stitches.

You will have a padded dressing.

We are likely to want to see you 1 week after the procedure to check the wound.

Contact details

The Mohs Surgery Team

Department of Dermatology Tel: 0116 258 5162

اگر آپ کو یہ معلومات کسی اور زبان میں درکار ہیں، تو براہ کرم مندرجہ ذیل نمبر پر ٹیلی فون کریں۔
على هذه المعلومات بلغةٍ أخرى، الرجاء الاتصال على رقم الهاتف الذي يظهر في الأسفل

જો તમને અન્ય ભાષામાં આ માહિતી જોઈતી હોય, તો નીચે આપેલ નંબર પર કૃપા કરી ટેલિફોન કરો

ਜੇ ਤੁਸੀਂ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਭਾਸ਼ਾ ਵਿਚ ਚਾਹੁੰਦੇ ਹੋ, ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਹੇਠਾਂ ਦਿੱਤੇ ਗਏ ਨੰਬਰ 'ਤੇ ਟੈਲੀਫੋਨ ਕਰੋ।

Aby uzyskać informacje w innym języku, proszę zadzwonić pod podany niżej numer telefonu

Previous reference:

If you would like this information in another language or format such as EasyRead or Braille, please telephone 0116 250 2959 or email equality@uhl-tr.nhs.uk