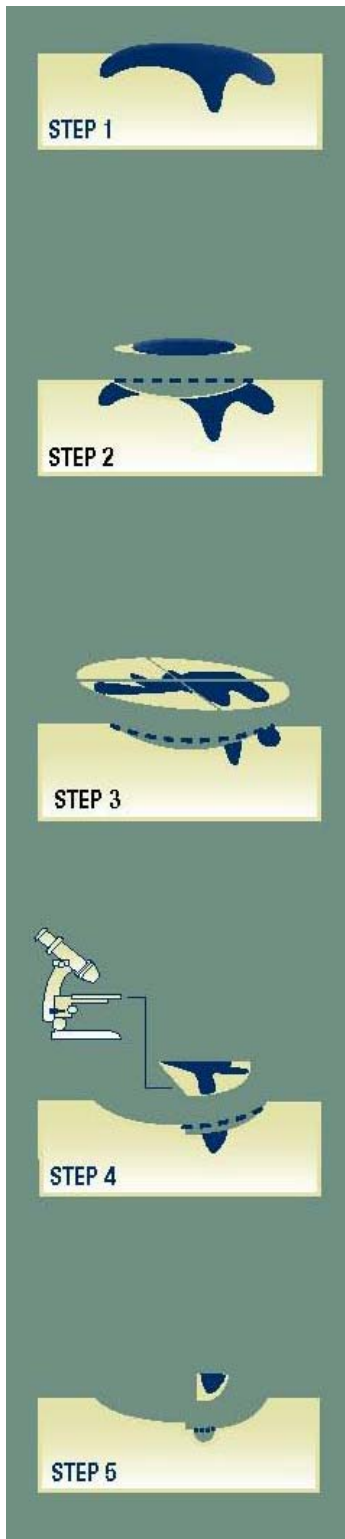


The Mohs Surgery Process



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.

Step 2: The visible portion of the tumor is surgically removed.

Step 3: A layer of skin is removed and divided into sections. The ACMS surgeon then color codes each of these sections with dyes and makes reference marks on the skin to show the source of these sections. A map of the surgical site is then drawn.

Step 4: The undersurface and edges of each section are microscopically examined for evidence of remaining cancer.

Step 5: If cancer cells are found under the microscope, the ACMS surgeon marks their location onto the “map” and returns to the patient to remove another layer of skin – but only from precisely where the cancer cells remain.

Step 6: The removal process stops when there is no longer any evidence of cancer remaining in the surgical site. Because Mohs surgery removes only tissue containing cancer, it ensures that the maximum amount of healthy tissue is kept intact.

Step 7: The ACMS surgeon discusses post-surgical options with the patient such as:

- a. A simple wound may be allowed to heal on its own.
- b. A slightly larger or deeper wound may be closed with stitches side-to-side.
- c. Large and deep wounds may require a skin graft or a flap that is then stitched closed.
- d. If the tumor is very large or in a cosmetically sensitive area, such as around the eye, another surgeon with special skills may be called upon to assist with reconstruction.