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Mohs Micrographic Surgery Repair Note

Patient: Nelson, Jeff (10/10/1980, MR#: AB12345)
Date Of Procedure: August 24, 2011
Surgeon: John Gibosn (Assistants: Smith, Jena; Histotech: N/A)
Referring Physician: Sample Physician

Repair of Post-Operative Defect with A Wedge Resection Advancement Flap

(Case#: ABC-123)

Location: Medial Right Inferior Helix
Indications: Wound resulting from Mohs micrographic surgery
Preop Diagnosis: Basal Cell CA / **Postop Diagnosis:** Basal Cell CA
Operative Procedure: Wedge Resection Advancement Flap
Size of Defect: 2.7 x 2 cm
Size of Repair: 6 cm²
Total Anesthetic: 5 cc of
Complications: None
Hemostasis: Electrodesiccation

Description of Procedure:

After the lesion was completely removed with the Mohs micrographic technique, surgical repair of the defect was planned and performed. The patient was positioned on the operating room table in the cutaneous surgery suite. The area was prepped and draped in a sterile fashion. A sterile marking pen was used to outline the proposed closure. After anesthesia was checked and supplemented as necessary, a wedge of cartilage was excised around the defect. Secondary wedges were excised as necessary to achieve appropriate contour of the anatomy. The wound margins were undermined in the appropriate plane. Standing cones were removed when necessary. Hemostasis was achieved. The Wedge Resection Advancement Flap was secured in place under minimal tension using subcutaneous interrupted 4-0 vicryl and superficial running 5-0 prolene sutures. The patient tolerated the procedure well. The patient left the unit in good medical condition and was asked to see us for suture removal on Monday, August 29, 2011. The wound was cleaned. a pressure dressing were applied. The patient was given detailed oral and written instructions on postoperative care. The patient will call us should there be any problems.

Repair of Post-Operative Defect with A Simple Linear Closure

(Case#: ABC-564)

Location: Mid Parietal Scalp

Indications: Wound resulting from Mohs micrographic surgery

Preop Diagnosis: Basal Cell CA / **Postop Diagnosis:** Basal Cell CA

Operative Procedure: Simple Linear Closure

Size of Defect: 2.7 x 2.9 cm

Size of Repair: 8.5 cm

Total Anesthetic: 15 cc of

Complications: None

Hemostasis: Electrodesiccation

Description of Procedure:

After the lesion was completely removed with the Mohs micrographic technique, surgical repair of the defect was planned and performed. The patient was positioned on the operating room table in the cutaneous surgery suite.

The area was prepped and draped in a sterile fashion. A sterile marking pen was used to outline the proposed closure.

After anesthesia was checked and supplemented as necessary, the wound margins were undermined in the appropriate plane. Standing cones were removed when necessary. Hemostasis was achieved.

The Simple Linear Closure was secured in place under minimal tension using subcutaneous interrupted 3-0 vicryl, superficial running 4-0 prolene sutures, and staples.

The patient tolerated the procedure well. The patient left the unit in good medical condition and was asked to see us for suture removal on Monday, August 29, 2011.

The wound was cleaned. Aquaphor healing ointment and a pressure dressing were applied. The patient was given detailed oral and written instructions on postoperative care. The patient will call us should there be any problems.

Mid Parietal Scalp

Post-Op



Repair



Medial Right Inferior Helix

Post-Op



Repair

