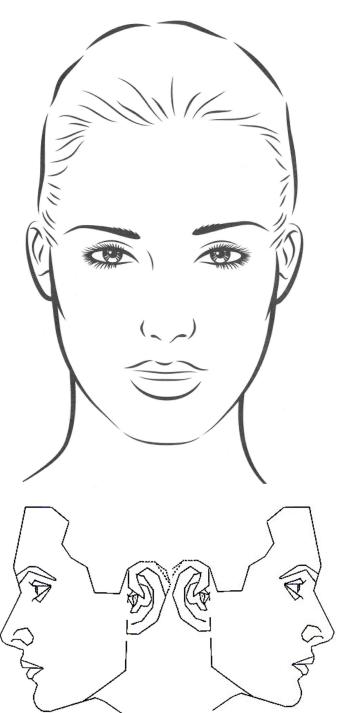


Patient:	DOB:	Mohs Date:	Date:	
Dear				
Dr. Baron has recommended Mol may not have been through a sca family-member who has had Mol of encouragement and a historica our age of modern medicine.	re like skin cancer be hs surgery. Either way	fore, or you might know a ,, we would like to give yo	a friend or our our our our a few words	
It's frightening for any of us to think about skin cancer surgery, especially when the cancer is on the nose, lips, ears or eyelids, hands, genitalia, or any other cosmetically- or functionally-sensitive area of the body. These are areas that none of us would want scarred or otherwise harmed in the process, and we also worry about the cancer's potential to continue grow, spread, or metastasize through the body.				
Because skin cancers in these critical locations have a high risk of recurring using other standard treatments such as curettage, wide local excision and brachytherapy (ionizing radiation), the Mohs surgical technique has been perfected over decades by specialized skin surgeons around the world. Mohs surgery is proven to have the highest level of tumor clearance as compared to all other methods of skin cancer treatment as well as the added benefit of highly skilled reconstructive repair. In short, Mohs surgery delivers the best cosmetic results and the highest rate of a complete cure.				
On the additional form included in that was biopsied and is schedule form and please bring it with you	ed for Mohs surgery w			
We hope that this information givestaff are dedicated to making you	,			
Very sincerely,				
The Aloha Team				

Jennifer Baran, M.D.

DERMATOLOGY AND MOHS SURGERY

PATIENT:	DOB:	Today's Date:
Diagnosis:	Pathology#:	Mohs Date:



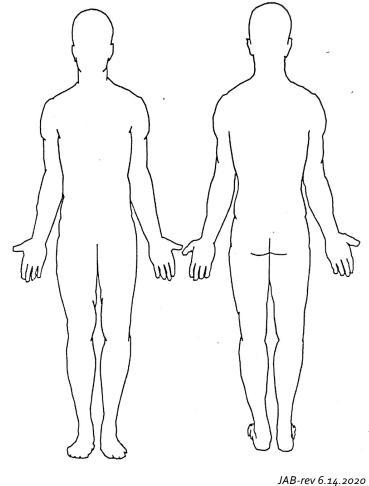
PATIENT INSTRUCTIONS

Please confirm skin cancer location on this form:

Solution Mark and circle the area to be treated.

Bring this form with you on your surgery day. If you misplace this form, a new one will be provided.

Patient signature:





Patient	DOB	Date
· aciciic	202	2410

The Mohs procedure offers the highest rate of cure because of the incredible amount of detailed processing done during the actual procedure. Skilled tissue preparation, staining, and doctor microscopic examination of the tissue margins **takes place while you wait**. This way, you have the highest level of confidence that your skin cancer has been fully removed at the end of your visit. Intra-operative tissue processing takes 45 - 90 minutes, and your case may require more than one waiting period. On average, most Mohs cases "clear" in 1 - 2 "levels." Please plan on spending a minimum of 3 hours with us on your Mohs day.

Prepare Ahead of Time:

- 1. Gather the aftercare supplies and have them ready for you at home (see below).
- 2. Do not skip dinner or breakfast, and have a quiet evening and restful sleep the night before.
- 3. Take all of your prescription- and non-prescription medications, at their regular times
- 4. Wear comfortable clothing, a button-up or zippered top if your surgery area is on the neck, chest or back and bring an extra sweatshirt or other layer for warmth.
- 5. If you opt to take a sedative, let Dr. Baron know and arrange for someone to drive you home safely. If you bring someone with you, they will need to wait in the car or outside in the building atrium for COVID safety.

BASIC SUPPLY CHECKLIST:

Warm tap water and gentle hand soap
Plain Vaseline/petrolatum, Aquaphor, or jbSKIN silver wound healing ointment
Non-stick gauze pads ("Telfa" or generic drug store brand)
Wound tape, paper or other type
Stretchy wrap, "Coban," "ACE," or other for wrap-around bandage of scalp, arm, hand, leg
Cold packs (ice or frozen peas in doubled-up Zip-loc bags), Tylenol or Extra-Strength Tyleno

What to Expect After Surgery:

- 1. A detailed wound care instruction form will be provided to you as well as verbal instructions from Dr. Baron and staff.
- 2. Your bandage will be large and bulky to protect the surgery site and to reduce any bleeding or infection risks. Plan to keep this bandage dry and in place for 24 48 hours.
- 3. When the anesthetic wears off, the area may feel sore, bruised or achy. Keep your activity level to a minimum, apply a cold compress on top of the bandage, and take Tylenol or Extra-Strength Tylenol for pain if you need it.
- 4. Your sutures will need to be removed by us in 6-7 days for a facial wound, or 7 14 days for a neck, scalp or body wound. **We will schedule this with you before you leave.**
- 5. Dr. Baron recommends an additional wound-check visit approximately one-month after suture removal, and a full skin examination in the first 3 months after surgery.

JAB-rev 6.14.2020