

Patient Education Literature

We recommend that you read this handout carefully in order to prepare yourself or family members for the proposed procedure. In doing so, you will benefit both the outcome and safety of the procedure. *If you still have any questions or concerns, we strongly encourage you to contact our office prior to your procedure so that we may clarify any pertinent issues. An educated patient is the best patient.*

Excisional Biopsy of Skin Lesion

Definition

Excisional = cutting and removing of skin or tissue

Biopsy = refers to a procedure that involves obtaining a tissue sample for microscopic analysis to establish a precise diagnosis

Lesion = an abnormal change in structure of an organ or part due to injury or disease

This procedure involves total removal of abnormal tissue in the skin.

Purpose of Procedure

This procedure is done to remove an abnormal area of skin for evaluation.

Preparation

The procedure will not be performed if you are currently taking, or have recently taken any medication that may interfere with your ability to clot your blood (blood thinners, aspirin, anti-inflammatory medicines, etc...). *Please refer to the attached list and tell us if you took any of these within the past 10 days.* If your new medication is not on the list, alert us immediately so that we may ensure optimal procedure safety. We will have reviewed all of your current medications with you during the pre-operative consultation. You are obligated to inform us if anything has changed (medication or otherwise) since your previous visit.

Procedure

This procedure involves making an incision around the abnormal area. An effort is made to plan the incision so any scarring is as discrete as possible. Local anesthetic is injected to reduce bleeding and to allow the procedure to be performed without a general anesthetic. The abnormal tissue is then removed and sent for pathological evaluation. In certain cases where malignancy is found, more extensive removal is necessary. Depending on the size and shape of the surgical site, the wound may be left to close on its own, closed directly with suture material, application of a skin graft, or local flaps of skin taken from nearby locations. The wound is covered with a surgical dressing.

Post Procedure

Following this procedure, pain medication will be prescribed to manage discomfort. In most cases the dressing will be removed in one to two days. If a skin graft is used the dressing will stay in place for seven to ten days. The area needs to be kept dry until the sutures are removed and healing is complete. Sutures will be removed in five to seven days.

Post-operative pain medications may include a codeine type medication that may cause drowsiness. Operation of motor vehicles or machinery is not allowed while using this medication. Returning to work or school can occur as soon as pain medication is no longer needed during the day.

Expectations of Outcome

This procedure should result in removal of the abnormal tissue. In cases of malignancy, further surgery may be required.

Possible Complications of the Procedure

This is a safe procedure, however, there are uncommon risks that may be associated with it. While we have discussed these and possibly others in your consultation, we would like you to have a list so that you may ask questions if you are still concerned. It is important that every patient be made aware of possible outcomes that may include, but are not limited to:

- Anesthesia complications: There is always a small risk with general anesthesia. This risk is increased if there is any family history of trouble with anesthesia. The risks can range from nausea and vomiting to very rare life threatening problems. You can discuss any questions with your anesthesiologist.
- Bleeding
- Infection
- Scarring
- Failure of the graft or flap to heal properly
- Recurrence of the lesion

We provide this literature for patients and family members. It is intended to be an educational supplement that highlights some of the important points of what we have previously discussed in the office. Alternative treatments, the purpose of the procedure/surgery, and the points in this handout have been covered in our face-to-face consultation(s).