



Coordinating MOHS And Reconstructive Surgery

Welcome to the office of Dr. Alan Burke with Virginia ENT - Facial Plastics & Reconstruction! You have been referred to see Dr. Burke by your MOHS surgeon. After you have completed your consultation with Dr. Burke about the reconstructive closure, our office will speak directly with your MOHS surgeon's office to coordinate the MOHS surgery and reconstructive closure. Please allow up to 2 weeks for us to coordinate this. If after 2 weeks you have not heard regarding scheduling of your procedures, please call your MOHS surgeon's office directly (For DAV Dermatology Associates of Virginia, call 804.939.6193).

Attached are the pre and post care instructions for your upcoming procedures. Please let us know if you have any questions or concerns regarding these instructions. It is imperative that you read these instructions prior to your procedure.

Dr. Alan Burke

Virginia ENT – Facial Plastics & Reconstruction

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Tricia Covington

Clinical & Surgical Coordinator

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Clinical Nurse

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Surgical Instructions – Excision of Skin Lesion

The following instructions are designed to help you recover from surgery as easily as possible. Taking care of yourself can help prevent complications. It is very important that you follow these instructions carefully following surgery. Your doctor or nurse will be happy to answer any additional questions you may have.

Pre-Procedure Instructions

- Unless your procedure is at the hospital or instructed otherwise, you may continue a normal diet the day of your procedure. If your procedure is being performed outside of the office setting (like St. Mary's Hospital), you will receive alternative instructions regarding eating and drinking prior to surgery.
- We recommend that you stop taking any aspirin-containing medications or blood thinners as permitted by the prescribing physician (you will need to confirm with the prescribing physician that it is permitted to discontinue these for 5-7 days prior to your procedure). You may resume taking these medications after the procedure.
- You do not need a driver unless otherwise directed by Dr. Burke. If you are having surgery outside the office setting (like St. Mary's Hospital), you must have a driver to the procedure. Some locations will be required that your driver stay at the location for the duration of the procedure.
- If you would like Xanax called into help you relax for this procedure, please notify Dr. Burke's nurse (Kim at 804.484.3700 ext 2038). You must have a driver to and from the procedure if you choose to take this medication.
- Make sure to call Tricia to schedule your 3-month follow-up appointment with Dr. Burke at (804) 484-3739.



Post-Procedure Instructions – Excision of Skin Lesion

- Tenderness, burning, redness, swelling and tightness at surgical site (this is due to the healing process) is common post procedure. Numbness or tingling may occur during the healing process. Some areas may not regain normal feeling – this is a normal and unavoidable outcome. Please report any persistent swelling, redness, sharp pain or change in drainage.
- Typically, Dr. Burke leaves a small opening in the incision to allow blood to drain out instead of collecting under the skin. An ooze is normal for about 3 days following the procedure. If active bleeding should occur, apply firm pressure to the site for a minimum of 20 minutes with a cotton ball soaked in Afrin.
- You may form one or more bumps along the incision line. These pus/red appearing bumps are stitch abscesses. You can apply antibiotic ointment (bacitracin recommended, not Neosporin) to these for 3 days and if they do not improve, please call the office, or email a photo.
- The incision consists of 2 layers of sutures. The internal layer takes 4-6 weeks to dissolve, and the external layer should dissolve in 7-10 days (unless told otherwise by Dr. Burke). Call the office if the sutures are not dissolving after 14 days.
- Pain medications (Tylenol, Advil) may help with discomfort if needed. Alternating medications may provide the best relief.

WOUND CARE:

- Gently wash and apply Vaseline to the site morning, night and before showering until the sutures dissolve. Keep a nice, thin layer on the incision line at all times, reapplying throughout the day as necessary. This acts as your occlusive “band-aid.” If you prefer, you may apply a covering/dressing when going in public, but otherwise it is not needed (unless otherwise instructed by Dr. Burke).
- You may shower if the site is covered by Vaseline. Avoid putting the site directly under a strong stream of water.
- Don’t scrub or submerge site in water until the external sutures have completely dissolved, but gently wash area.
- Avoid shaving close to the sutures.
- You may apply makeup and sunscreen after the sutures are removed or once the wound has completely healed.

If you need to contact the office outside of normal business hours for urgent concerns, please call (804) 484-3700 and choose the option for the on-call physician. For any emergency, please call 911.

Scheduling: Tricia (804) 484-3739

Nurse: Kim (804) 484-3700 ext. 2038 | SmallenbergK@VirginiaENT.com

FOLLOW UP:

1. Email photo of wound at **7-10 days**: _____.
2. Schedule a follow up office visit at **3 months**: _____.