



SKIN CARE FOCUS

Skin ... It's What We Do

Kingsport

• Dermatology Associates •

Bristol

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ASSOCIATES

Skin ... It's What We Do

**Our Physicians are Board
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FAQs: Mohs Micrographic Surgery

The decision to perform Mohs surgery is a collaborative effort among the **Dermatology Associates**. If your dermatologist determines that Mohs surgery is the best option to successfully treat your skin cancer, you will be referred to Dr. Chad Thomas, our Mohs expert. Below are answers to several common questions about Mohs skin cancer surgery. To learn more, contact **Dermatology Associates** at (423) 246-4961.



Chad J. Thomas, MD

What is Mohs surgery?

Mohs surgery is a highly specialized and precise treatment for skin cancer in which the cancer is removed in stages, one tissue layer at a time. It is named for Dr. Frederic Mohs, who developed the surgical technique. It is an outpatient procedure, performed under local anesthesia, and is distinguished by a specific technique of tissue examination that is unique to Mohs surgery and allows for 100% margin evaluation. Although other surgical specialists may check excision margins, the form of pathologic examination of the tissue employed is not the same as Mohs surgery.

During Mohs surgery, a tissue layer is removed, its edges are marked with colored dyes, and a map of the specimen is created. The tissue is then processed onto microscope slides in our office. These slides are carefully examined under the microscope by Dr. Thomas so that any microscopic roots of the cancer can be precisely identified and mapped. If cancer cells are seen, an additional tissue layer is removed only in areas where the cancer is still present, leaving normal skin intact. This saves as much normal, healthy skin as possible.

Once the cancer has been removed, Dr. Thomas will explain the wound repair options including natural healing (granulation), stitching the wound together using a side-to-side closure, or using a skin flap or graft.

Dr. Thomas is a member of the American College of Mohs Surgery. Mohs College surgeons have undergone at least 1 year of fellowship training beyond dermatology residency, which allows for additional experience in the specialized processes and techniques characteristic of Mohs surgery.

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FAQs: Mohs Micrographic Surgery

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I don't see anything after my biopsy. Do I really need to be treated?

Yes. Following a biopsy, your skin cancer may no longer be visible. However, the surface lesion that was removed can represent the "tip of the iceberg." More tumor cells may remain in the skin. These can continue to grow downward and outward, like roots of a tree. These "roots" are not visible with the naked eye. If they are not removed, the tumor will likely reappear and require more extensive surgery (see examples of cited studies below). Tumors that are neglected can spread deeply into the skin and invade nearby structures. On rare occasions, these cancerous cells can metastasize to lymph nodes and other organs in the body.

How long does Mohs surgery take?

Although Mohs surgery can take longer than other techniques to perform, advances in technology, such as automated staining of tissue samples, have made it quicker. While it is impossible to predict exactly what timeframe to expect for each Mohs surgery procedure, the entire procedure usually lasts several hours. For larger tumors, clearing the cancer roots and reconstructing the defect can take the better part of a day.

Will Mohs surgery leave a scar?

Yes. As with any treatment for skin cancer, Mohs surgery will leave a scar. Mohs surgery preserves as much healthy skin as possible and maximizes options for repairing the surgical defect, once the tumor is completely removed. Once Dr. Thomas has completely removed your skin cancer through Mohs surgery, reconstruction for optimizing the final functional and cosmetic result becomes the highest priority. Generally, a post-surgical scar improves with time and can take up to

Why You Should Choose a Fellowship-Trained Mohs Surgeon



You want your skin cancer treatment to be performed with the highest standards of quality and competency. While any board certified dermatologist may perform Mohs surgery, only members of the American College of Mohs Surgery (ACMS) have undergone rigorous fellowship training consisting of over 500 cases of varying complexity and extensive training in skin cancer pathology and facial reconstruction. Dr. Thomas is the only ACMS dermatologist in Kingsport and only one of 27 in Tennessee. ACMS is the only organization that requires its members to be accepted to and successfully complete a fellowship that requires at least one full year of training and hands-on experience following completion of a dermatology residency.



Dr. Thomas performs Mohs surgery.

1 year or more to fully mature. Dr. Thomas is available for you throughout the healing process to discuss any concerns that may arise.

Meet Dr. Thomas

Dr. Thomas is a native of East Tennessee. He earned his B.S. degree at the University of Tennessee and received his doctorate of medicine at ETSU Quillen College of Medicine. He was an intern at Spartanburg Regional Medical Center in Spartanburg, SC, and completed his dermatology residency and Mohs micrographic surgery fellowship/procedural dermatology fellowship training at Geisinger Medical Center in Danville, PA. Dr. Thomas joined the Dermatology Associates in 2006 and has performed more than 6,300 Mohs procedures.

Dr. Thomas has been involved with medical missions in Mexico, Honduras and Ecuador. He served as a

sponsored American Academy of Dermatology camp counselor for children with skin disorders, and volunteers annually with the AAD Melanoma/Skin Cancer Screening Program. Dr. Thomas enjoys time with his wife and three young children, and enjoys golf, tennis, water skiing, and snow skiing. He and his family are members of Boones Creek Christian Church.

References

1. Holmkvist, Kristina A., MD, Rogers, Gary S., MD and Dahl, Patrick R., MD, "Incidence of residual basal cell carcinoma in patients who appear tumor free after biopsy," *Journal of the American Academy of Dermatology*, 1999 October, Volume 41, Issue 4, pages 600-605.
2. Alcalay, J., MD and Alcalay, R., MD, "Histological evaluation of residual basal cell carcinoma after shave biopsy prior to Mohs micrographic surgery," *Journal of the European Academy of Dermatology and Venereology*, no. doi: 10.1111/j.1468-3083.2010.03881.x