

## Dermatology and Mohs Surgery

5199 N Royal Drive, Traverse City, MI 49684
Laurel Leithauser, MD
Rachel Zenner, FNP
Natalie Gabel, RN

## CONSENT AND AUTHORIZATION FOR SURGICAL PROCEDURES

I hereby consent to the medical and surgical care and treatment, as may be deemed necessary or advisable in the judgment of Laurel Leithauser, MD, Rachel Zenner, FNP, and Natalie Gabel, RN. This may include, but is not limited to laboratory procedures (including diagnostic testing such as lab draws and skin biopsies), medical and surgical treatment or procedure (including wart treatments, cryotherapy, electrocautery and destruction, surgical removals, or excisions), or other services rendered during my visit Laurel Leithauser, MD, Rachel Zenner, FNP, and Natalie Gabel, RN. at Dermatology and Mohs Surgery.

In order to ensure that you understand all aspects of your visit, we encourage you to ask any questions regarding any procedures prior to them being performed. Laurel Leithauser, MD, Rachel Zenner, FNP, Natalie Gabel, RN and staff will answer any questions and discuss any procedures and concerns with you in regard to the following:

- Benefits of the proposed procedure.
- The way the treatment or procedure is to be performed.
- Alternative treatment options.
- Probable consequences of not receiving the treatment.
- Risk and side effects involved with the procedure.
- Potential for additional incurred charges.
- The right to withdraw informed consent at any time, in writing.

Should a biopsy/culture be performed, or any other procedure in which a sample or section of your skin is removed, the specimen will be sent to an outside pathology lab (Pinkus/Aurora, St. Joseph Mercy, Munson, and CTA) for an accurate diagnosis, unless otherwise recommended by your clinician. This process will involve any testing necessary including special staining or outside consultations which will incur additional charges. Billing questions regard pathology lab charges should be addressed with the pathology lab itself. A staff member from Dermatology and Mohs Surgery will call you in approximately 7-10 days to inform you of your results.

I acknowledge that some medical diagnoses (such as warts, pre-cancerous, irritated moles) will require multiple treatments with one or more methods that may change throughout the course of treatment according to the providers treatment recommendation. I understand that each office visit and procedure will be billed accordingly.

With any procedure, there are risks involved which include, but are not limited to the following:

- 1. PAIN: Some mild discomfort is experienced when the area is first anesthetized with the numbing medication. You may experience some mild discomfort during the procedure if the numbing medication has worn off in a particular location. This is easily remedied by immediately giving more anesthetic in that area. After the procedure some discomfort will be experienced at the surgical site. This is easily controlled with pain medications for a few days.
- 2. INFECTION. Any time that the skin is injured an infection is possible. The rate of infection is very low. Some patients will receive postoperative antibiotics to prevent an infection. If you feel that your wound is infected after surgery please call our office immediately.
- 3. BLEEDING: When you leave our office you will have a pressure bandage applied to your wound. Bleeding is always possible after surgery. Most cases of postoperative bleeding are easily stopped by applying pressure for 20 minutes over the site. If this does not work please call our office immediately.
- 4. SWELLING: After surgery you should expect some swelling where your surgery was performed and around the wound as well.
- S. HEMATOMA. A hematoma is a collection of blood that forms under the skin. This results from bleeding that occurs after the surgery. A "lump" forms under the skin, which represents the dried blood. If this occurs call our office immediately.
- 6. SCAR FORMATION: Any time that the skin is injured a scar will form. Some scars are more noticeable than others, but a scar is always present. A scar will form after your surgery. Hypertrophic and keloidal scarring are possible. If you have a history of bad scarring please advise us at the time of your visit. The cosmetic appearance following surgery is unpredictable.
- 7. WOUND DEHISCENCE: This means that your wound has broken back open after it has been repaired with sutures. It is very important to take it easy after your surgery so that unnecessary strain is not placed on the wound. This is an uncommon complication
- 8. FAILURE OF FLAP OR SKIN GRAFT: After your surgery is completed we will need to repair the wound. Some patients are repaired with either a flap or skin graft. A flap is when skin is borrowed from a nearby site to close the defect. A skin graft is when a piece of skin is taken from one site and transplanted to another. A possible complication is the failure of either of these to take at the new site. Smoking is a documented risk for this complication. If you are a smoker it is recommended that you discontinue smoking for one week before and after the procedure
- 9. TEMPORARY OR PERMANENT NERVE DAMAGE: The primary goal of your surgery is to completely remove the lesion in order to accomplish this, it is sometimes necessary to damage a nerve. Nerve damage can be temporary or permanent. Recovery usually takes 6 months or more, and rarely can require additional surgery. Nerve damage may be limited to a loss of sensation or may include paralysis

- 10. DISTORTION/ALTERATION OF SURROUNDING ANATOMIC The repair or healing of surgical wounds may distort the appearance of adjacent structures. Our goal is to completely remove your skin cancer, and then concern ourselves with the function and appearance of surrounding anatomic structures.
- 11. TEMPORARY OR PERMANENT HAIR LOSS. Since the primary goal of your surgery is to completely remove the lesion, it is sometimes necessary to damage hair-bearing skin, such as the scalp. The resulting hair loss can be temporary or permanent.
- 12. RECURRENCE: Recurrence is possible if the lesion is not completely removed. We will do everything we can to remove the lesion in its entirety, however since they grow microscopically, it is possible that the entire lesion is not removed.

I have read the consent form in its entirety. I understand the risks associated with procedures that may occur during my visits at Dermatology and Mohs Surgery. I do not impose any limitations on Dermatology and Mohs Surgery and its staff. I understand that I should discuss any questions or concerns with Laurel Leithauser, MD, Rachel Zenner, FNP, and Natalie Gabel, RN, prior to any procedure and therefore; with my signature, agree to have any necessary procedures performed.

PATIENT SIGNATURE:	DATE:
WITNESS SIGNATURE:	DATE: