Denver Eyelid Specialists
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Informed Consent for Cancer reconstruction surgery

What can cause the need for cancer reconstruction surgery?

There are multiple different skin cancers that can affect the eyelid and near the eyelid. Often these cancers have to be removed or they can spread and damage adjacent structures near the eye or the eye itself.

What is a cancer reconstruction surgery?

Patients who have cancer will usually have their cancer excised by a Mohs surgeon. Dr Thiagarajah will then reconstruct the eyelid defect or hole to retain the best function of the eyelid and maintain as much of the cosmetic appearance as possible. It is difficult to predict ahead of time what the reconstruction will be because it is not known how much eyelid tissue will be removed by the Mohs surgeon. What is visible on the eyelid does not necessarily include the entire cancer. The Mohs surgeon will use a microscope to look at the edges of the removed tissue to see if the cancer is gone or still remains. Sometimes what is visible as cancer on the eyelid is what needs to be removed alone but sometimes that is not the case. There are times where the cancer cells have spread quite far beyond what is visible. Once the cancer is removed by the Mohs surgeon, the patient will then come to the facility where Dr Thiagarajah is operating. Depending on the defect size, Dr Thiagarajah will close and fix the defect. This may include simple closing the hole, taking skin grafts from the same side or other side, skin grafts from around the ear, arm or shoulder. Sometimes tissue nears to be harvested from the inside of another eyelid. This tissue is sometimes taken from the upper eyelid of the other eye or the same eye. Dr Thiagarajah may have to make an incision on the side of the eyelid extending close to the ear to help slide tissue into place. The eye may or may not be patched after surgery. In rare cases, the eyelid has to be closed for 6 weeks for proper healing to occur. In six weeks, the eyelid is then reopened in the operating room.

How will cancer reconstruction surgery affect my vision or appearance?

The eyelid is unlikely to look “normal” after surgery. There will be bruising and swelling. As the surgery heals, the eyelid may not look completely normal compared to the other side. Skin grafts to the eyelid can take 8 weeks to 12 weeks to fully heal. Initially the graft may appear dark and it may take some time for the skin graft to blend in with the eyelid skin. The skin graft can be visible after complete healing. Cancer Reconstruction surgery should not affect the vision directly as there is no surgery that is being done on the eyeball itself. However, patients can have blurry vision after surgery as the eyelid is irritated and more tears can be produced. Also there can be antibiotic ointment in the eye which can also blur the vision. Finally in some cases the eyelid must be closed for 6 weeks and the patient will not be able to see out of the eye during that time period.

What are the major risks?

As with any surgery of the eyelid there are risks of CANCER RECONSTRUCTION surgery including risk of vision loss, double vision, bleeding, scarring, infection. There is a possibility that on further pathology analysis that the cancer is not completely removed. You may need additional treatment or surgery to treat these complications; the cost of the additional treatment or surgery is NOT included in the fee for this surgery. Due to individual differences in anatomy, response to surgery, and wound healing, no guarantees can be made as to your final result. Due to individual differences in anatomy, response to surgery, and wound healing, no guarantees can be made as to your final result. For some patients, changes in appearance may lead to anger, anxiety, depression, or other emotional reactions.

What are the alternatives?

It is possible to do nothing and live with the skin cancer. The cancer will most likely grow and slowly damage structures around the eye. There is a risk that allowing it to grow can cause it to spread to vital organs of the body. Other alternatives include radiation of the cancer or topical creams that can help to eliminate the skin cancer.

What type of anesthesia is used? what are the major risks?

Most CANCER RECONSTRUCTION SURGERY surgeries are done with “local” anesthesia, that is, injections around the eye to numb the area. You may also receive sedation from a needle placed into a vein in your arm or pills taken before surgery. Sometimes general anesthesia is used where the patient is completely asleep with a tube down the throat. Risks of anesthesia include but are not limited to damage to the eye and surrounding tissue and structures, loss of vision, breathing problems, and, in extremely rare circumstances, stroke or death.

Patient’s acceptance of risks

I have read the above information and have discussed it with my physician. I understand that it is impossible for the physician to inform me of every possible complication that may occur. My physician has told me that results cannot be guaranteed, that adjustments and more surgery may be necessary, and that there are additional costs associated with more treatment. By signing below, I agree that my physician has answered all of my questions, that I understand and accept the risks, benefits, and alternatives of CANCER RECONSTRUCTION SURGERY, and the costs associated with this surgery and future treatment, and that I feel I will be able to accept changes in my appearance .

Patient (or person authorized to sign for patient)

Date