

Ibn Sina Foundation, Inc.
Community Medical Center
11226 South Wilcrest Drive, Houston, TX 77099
Tel: 281-977-7462 Fax: 281-977-7472

Mushtaq A. Khan, M.D.
Board Certified Dermatologist

Operative Report

Date of Procedure: _____ **Ibn Sina Derm No:** _____
Patient Name: _____ **Home#** _____ **Cell or Work#** _____
Date of Birth: _____ **Age:** _____ **Sex:** Male Female
Operative Site: _____ **Preop Size:** _____ cm **Postop Size:** _____ cm
Operative Procedure: Biopsy Shave Excision Electro-cauterization
Diagnostic Therapeutic

Preoperative Diagnosis: _____ **Preoperative Diagnosis:** same

Informed Written Consent: Preoperative Checklist, Operative Procedure, Postoperative instructions and the written signed consent reviewed with the patient. The patient consented to proceed with procedure.

Local Anesthetic: Lidocaine 1% with Epinephrine 1:100,000 buffered with 8.4% Sodium Bicarbonate Solution at 1:10 Dilution to reduce acidity and resulting pain, refrigerated or kept on ice to reduce burning and stinging.

Surgical Procedure: The patient was placed on the operating table in a position most appropriate for the procedure and most comfortable to the patient. The surgical site was prepped with Betadine &/or Hibiclens surgical scrub and covered with sterile drape. The lesion to be excised was delineated with a rim of surrounding normal skin and local anesthesia administered. Once adequate anesthesia was achieved, the lesion was excised with #15 blade. Hemostasis was obtained with local pressure and electro-cauterization of bleeding vessels. The surgical site was dressed with a pressure dressing. Patient tolerated the procedure well. Blood loss was minimal. Procedure time was 15 minutes. Post-operative instructions and Wound management were again discussed with the patient. Patient tolerated the procedure well and left the clinic in satisfactory condition. The specimen was sent to the pathology laboratory for definitive diagnosis. The patient was scheduled for a follow up visit for Pathology review and further recommendations.

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Date of Procedure:

Ibn Sina Derm No:

Patient Name:

Home#

Cell or Work#

Date of Birth:

Age:

Sex: Male Female

Operative Site:

Preop Size:

cm **Postop Size:** cm

Operative Procedure: Full Thickness Excision with Closure Diagnostic Therapeutic

Preoperative Diagnosis:

Preoperative Diagnosis: same

Informed Written Consent: Preoperative Checklist, Operative Procedure, Postoperative instructions and the written signed consent reviewed with the patient. The patient consented to proceed with procedure.

Local Anesthetic: Lidocaine 1% with Epinephrine 1:100,000 buffered with 8.4% Sodium Bicarbonate Solution at 1:10 Dilution to reduce acidity and resulting pain, refrigerated or kept on ice to reduce burning and stinging.

Surgical Procedure: The patient was placed on the operating table in a position most appropriate for the procedure and most comfortable to the patient. The surgical site was prepped with Betadine &/or Hibiclens surgical scrub and covered with sterile drape. The lesion to be excised was delineated with a rim of surrounding normal skin and local anesthesia administered. Once adequate anesthesia was achieved, the lesion was excised with #15 blade. Hemostasis was obtained with local pressure and electro-cauterization & ligation of bleeding vessels. The defect was closed in layers after releasing the tension at the sutures lines. The subcutaneous layer and the deep dermis were approximated with -0 Vicryl Sutures and the skin was closed with interrupted -0 Prolene sutures. The surgical site was dressed with a pressure dressing. Patient tolerated the procedure well. Blood loss was minimal. Procedure time was 15 minutes. Post-operative instructions and Wound management were again discussed with the patient. Patient tolerated the procedure well and left the clinic in satisfactory condition. The specimen was sent to the pathology laboratory for definitive diagnosis. The patient was scheduled for a follow up visit for Pathology review and further recommendations.