



Operation Information

Excision of Mole/ Naevus

Introduction

A mole / naevus is a type of lesion that contains nevus cells (a type of melanocyte). A mole can be either subdermal (under the skin) or a pigmented growth on the skin. It is usually in colors of brown or bronze, sometimes flesh-colored. Its shape and volume could be varied.

Although most of the mole / nevi are benign, malignancy could still be possible. For example, the colors of mole / naevus may deepen during pregnancy and adolescence, or they may fade or disappear over time. A comprehensive assessment by a specialist and pathology examination of the mole / naevus is advised.

Outcomes

Removal of mole/ naevus may reduce the risk of melanoma and improve the appearance of the skin.

Procedures

1. The operation can be performed under local anaesthesia or general anaesthesia.
2. Use of a surgical blade to excise the mole or naevus.
3. Use of sutures to close the wound if necessary and a dressing is applied.

Possible Risks & Complications

1. Wound pain, redness and edematous
2. Wound scarring
3. Wound infection
4. Wound bleeding
5. Wound dehiscence
6. Hyperpigmentation or formation of keloid

** The risks listed above are in general terms and the possibility of complications is not exhaustive. Please understand that even though all operations are carried out with utmost professionalism and care, this does not rule out the possibility of complications arising. In the event of peripheral organ damage or post-operative haemorrhage or leakage, further operations may be required.

Pre-operative Preparations

1. The procedure and possible complications will be explained by the doctor and a consent form must be signed prior to the operation.
2. Proper skin hygiene and integrity is suggested to minimize the risk of surgical infection.
3. No food or drink six hours before the operation. (for general anaesthesia only)
4. Make-up should be removed on the operation date. (if applicable)
5. Please inform the doctor and nurse all your past medical history, previous surgical operations, current medication and any complication with drug or anaesthesia. Please inform doctor if you are taking medications, such as Aspirin, Warfarin, Xarelto or Pradaxa, dietary supplement and Chinese medicine.
6. Please change into a surgical gown after removing all belongings including undergarments, dentures, jewellery and contact lenses.
7. Please empty your bladder before the operation.

Post-operative Instructions

General

1. After general anaesthesia, you may:
 - experience discomfort in the throat after tracheal intubation.
 - experience side effects of anaesthesia including feeling tired, drowsy, nausea or vomiting. Inform the nurse if symptoms persist or worsen.
2. Please inform the nurse(s) of wound pain. Analgesics may be given as prescribed by the doctor.

Surgical Site Care

1. Following doctor's advice, do not remove the dressing by self-decision; after the operation, nurses will instruct you of wound care.
2. Nurses will arrange follow up appointment for wound dressing / stitch removal.
3. The wound should be covered by water-proof dressing. The dressing must be kept clean and dry.

Diet

A normal diet may be resumed as instructed after recovery from anaesthesia.

Activities

1. Compression and collisions on the wound should be avoided.
2. Avoid bathing and swimming before the wound completely healed or the removal of wound dressing.

Advice on Discharge

1. Immediately consult your doctor or return to the hospital for professional attention in the event of severe wound pain associated with redness and swelling, tenderness, secretion of pus, blood seepage, shivering, high fever over 38°C or 100.4°F, or any other unusual symptoms etc.
2. Any follow-up consultation should be attended as schedule.

Should there be any enquiries or concerns, please consult the attending doctor.

Under the professional care of the doctor, you will gradually recover. We wish you all the best during your treatment and recovery.

If you have any questions after reading the entire leaflet, please write them down in the spaces provided in order for the doctor to further follow-up.

Compiled by Union Hospital Operating Theatre (OT) Governance Committee

The above information is for reference only, please enquire your physician for details
Our Hospital reserves the RIGHT to amend any information in this leaflet without prior notification

