



Scott R. Freeman, M.D.
Board certified Dermatologist
Fellowship trained skin cancer
and reconstructive surgeon



**This pamphlet contains important information!
Please read immediately to be prepared for surgery**

Scott R. Freeman, M.D.
70 Midtown Park East
Mobile, AL 36606
(251) 544-6407

www.sunrisederm.com

Canceling an Appointment:

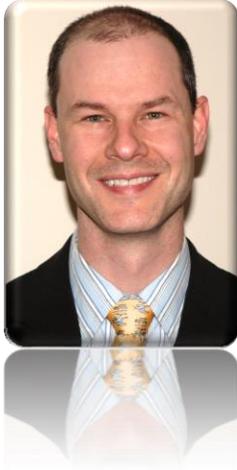
If you must change an appointment, please call us as soon as possible. This courtesy allows us to schedule another patient for medical care. Please do not fail to show for an appointment. **Failure to keep an appointment or canceling within 24 hours may result in a cancellation fee.**

Welcome to our facility

We are pleased that you have chosen our facility for your surgical care. Our goal is to provide you with the quality care and expertise that you expect and deserve.

This brochure has been developed not to replace our personal communication but to complement it. It will acquaint you with our practice and give you a better understanding of how our facility works. We take great pride in our staff's training and professional capabilities. Please feel free to ask any questions you may have regarding your medical care, fees, insurance, or other office policies. We are concerned about you and want to answer all questions to your satisfaction.

We are always happy to listen to any suggestions regarding our office procedures that will improve the care you receive. It is essential that our patients are well informed, relaxed, happy and above all, confident. For more information about Dr. Freeman or skin cancer, please feel free to visit our website: www.sunrisederm.com.



Scott R. Freeman, M.D.

Dr. Freeman grew up here in Mobile, AL and graduated with honors from The University of Alabama in Tuscaloosa, AL in 1998. Dr. Freeman attended The University of South Alabama College of Medicine in Mobile, AL and graduated with honors in 2004. He was inducted into the prestigious Alpha Omega Alpha honor society, which is the highest academic honor in medical school.

Dr. Freeman completed a two-year NIH immunodermatology research fellowship and his dermatology residency at the University of Colorado in Denver.

Dr. Freeman has trained under the direction of Drs. John Zitelli and David Brodland in a Mohs Surgery, Cutaneous Oncology, and Facial Plastic and Reconstructive Surgery fellowship. The training is officially approved by the American College of Mohs Surgery and the AMA's Accreditation Council of Graduate Medical Education.

Dr. Freeman has authored numerous articles and book chapters on a variety of topics including botulinum toxins, acne therapeutics, melanoma, tanning advertisement to minors, dermatology resident training satisfaction, ACGME accreditation of dermatology fellowships and human research review committee requirements in medical journals. He has been a speaker at both national and international meetings.

Dr. Freeman is a member of the Society for Investigative Dermatology, the American Academy of Dermatology, the American Society of Dermatologic Surgery and the Dermatology Foundation.

Preparing for Surgery

The morning of surgery: Please bathe/shower and wash your hair. This will minimize the risk of a surgical site infection.

Medical History: Upon arrival at our office you will be asked to complete a medical history form, provide a current insurance card, a photo ID and your primary care physician's name and address. It may be helpful for you to bring a list of medications and illnesses. **Please plan to arrive about 15 minutes before your scheduled appointment** to complete all information.

Medications: Continue all medications prescribed by your doctor including blood thinners like Coumadin or Aspirin. If you are taking medicine or herbal supplements without your doctors orders, please discontinue them 10 days prior to your surgery appointment (**including Aspirin, Ibuprofen, Anacin, Bufferin, Excedrin, Alka Seltzer, Percodan, Advil, Aleve, Motrin, Oral Vitamin E, garlic, ginseng and Ginko Biloba**). You may take Tylenol if needed for pain. Alcohol will also promote bleeding, so avoid alcoholic beverages 48 hours before surgery. Please avoid wearing make-up, perfume, nail polish, and jewelry. **If you require oxygen, be sure to bring enough of a supply to last the entire day. We do not have oxygen on supply here.**

Transportation: Since the doctor may give you a mild sedative, **it is necessary that you arrange to have a companion drive you from our facility. Failure to do so may result in having to reschedule your appointment. However, seating is limited and we ask that you have only 1-2 companions.**

Breakfast: The day of surgery, we suggest that you eat your normal breakfast, unless otherwise specified.

Nursing Home Patients: Nursing home patients are required to bring a companion with them to help with their needs throughout the day. We are not staffed to help with individual/special care.

After Surgery

Wound care: Instructions for wound care will be provided by staff verbally and in written form. Wound care ranges from simply protecting and preserving a bandage applied in the facility to daily changes of the bandage. Should wound care be necessary, the bandage materials are available for purchase in our office.

Follow-up appointment: Usually one return visit is all that is needed to examine the healed surgical site or to remove your surgical dressings. Afterwards, you may return to your referring physician for routine check-ups. A follow-up period of four years for the treated skin-cancer is essential. After having one skin cancer, statistics show that you have a higher chance of developing a second skin cancer. You should have your skin checked by your referring dermatologist at least once a year for four years not only to examine the treated skin cancer but also to check for new skin cancers.

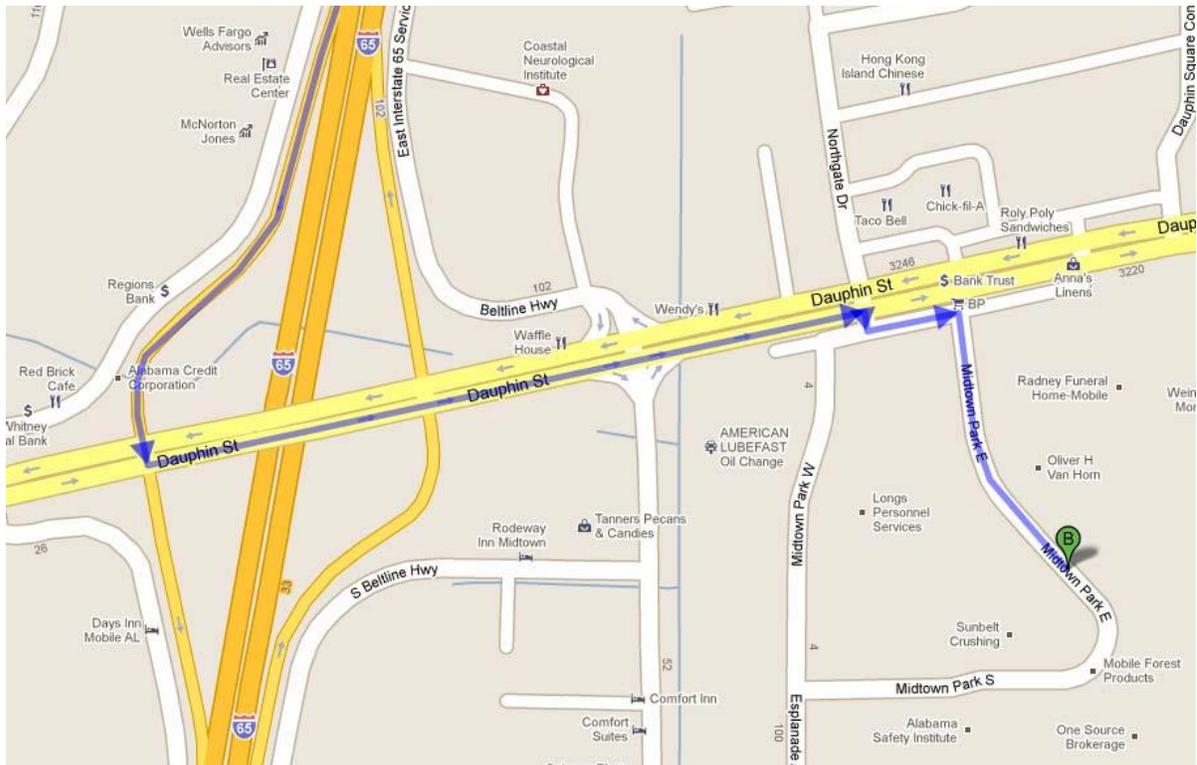
Protect yourself: The best protection from skin cancer is to avoid the harmful ultraviolet rays of the sun. Even if you tan easily, the sun can contribute to skin cancer in two ways. The sunlight damages the genes that control cell growth, and sunlight damages the body's immune system so that early cancers grow unchecked by normal immune defense. Minimize exposure by:

1. Using any sunscreen with a sun protection factor (SPF) of at least 30 and preferably with UVA/UVB protection when you spend any time in the sun. The most effective sunscreens have special stabilizers. These include Neutrogena with Helioplex, and those with Anthelios.
2. Avoid sun exposure during mid-day hours (10 a.m. to 3 p.m.)
3. Do not stay outdoors unprotected on cloudy days since the ultraviolet light penetrates easily through the clouds.
4. Sunscreens approved by our physician are available for purchase as a convenience for our patients and to be sure you are able to practice adequate sun protection. If you follow this advice, it may not be necessary to restrict your activities or change your lifestyle.

Sunrise Dermatology Facility Information

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- Free wireless internet access is available
- Wound care products available for purchase
- Sunscreens available for purchase
- Seating is limited
- Please plan to be in the facility the **ENTIRE DAY** and inform your driver or companion of this as well



Directions to Sunrise Dermatology

From I-65 S, take exit 4 for Dauphin St and turn east (turn left from the north and right from the south) onto Dauphin St. Drive 0.2 miles then turn right on Northgate drive, immediately turn left toward Midtown Park E. Take the first right onto Midtown Park E.

Patient/Insurance Billing

Please be sure to bring your current insurance cards and a photo ID with you to each visit. We will need to keep current copies in your records.

It is your responsibility to know if our facility participates with your insurance and to know if you will be responsible for any out of pocket expense such as deductible and co-insurance. You can check your insurance coverage by calling the phone number on the back of your insurance card to check participation status. Our billing will include the doctor's professional fees as well as outpatient surgical fees.

If there is any question about our participation with your insurance, please contact our office with your insurance information. We will verify your insurance coverage and advise you of any out of pocket expenses you will owe such as co-pay, deductible and coinsurance.

Billing Procedures

- We will bill your insurance carrier for you.
- You will be asked on your appointment date to pay for services not covered by insurance. This includes deductibles, co-pays, and co-insurance amounts, occasionally office visits and cosmetic procedures. We accept cash, check or credit cards.
- Some insurance plans apply separate co-pays for both the office and the outpatient facility. You will be responsible for both.
- After 60 days, if insurance has not processed the claim, it will become your responsibility.

Please note:

- **Medical Assistance:** We are NOT participating with medical assistance programs. In situations where this may be your 2nd insurance, you are responsible for any balance due that is not covered by your primary insurance carrier.
- **Medicare:** Medicare patients are responsible for paying their annual deductible each year and are responsible for the 20% allowable charges not paid by Medicare thereafter. If you have 2nd coverage, we will also bill this insurance for you. If after 60 days, the 2nd insurance carrier does not cover this portion of the bill, our office will bill you directly.

If prior authorization or referral is required, please contact your insurance company or your primary care physician at least one week prior to your appointment. Let them know the following: You are having Mohs Surgery and possible reconstruction.

Procedure code 17311

We would not want anyone to be denied medical care because of financial hardship. If you have difficulties understanding or paying our bill, we encourage you to discuss your problem with our billing office staff.

Frequently asked questions about our surgery

What is Mohs Surgery?

Mohs Surgery is a highly specialized treatment for the total removal of skin cancer and is named in honor of Dr. Frederic Mohs, the physician who developed the technique. Mohs Surgery eliminates the guesswork used with all other methods of treating skin cancer. Other methods require the surgeon to estimate how wide or deep the roots of skin cancer have grown. Mohs surgery differs by the use of complete microscopic examination of all tissues removed. This allows the Mohs surgeon to remove only the cancer cells and leave the normal skin untouched.

What are the advantages of Mohs surgery and what are my chances for cure?

By using detailed mapping techniques and complete microscopic control, the Mohs surgeon can pinpoint areas involved with cancer that are otherwise invisible to the naked eye. Therefore, even the smallest microscopic roots of cancer can be removed. The result is (1) the removal of as little normal skin as possible, and (2) the highest possibility for curing the cancer. Using Mohs surgery, the percentage of cure is more than 99% for most skin cancers, even when other forms of treatment have failed. Other methods of treatment offer only a 50% chance of success if previous treatments have failed. Other common treatments for skin cancer (including destroying tissue by scraping, burning or liquid nitrogen; routine surgery; radiation; and chemical creams) offer lower cure rates and often result in larger wounds.

When will I be able to return to work?

Most patients are able to return to work the day after surgery.

What if I have more than one skin cancer?

Usually we treat only one skin cancer site per visit. Each treatment site requires time and special attention. Most insurance companies limit reimbursement to a single skin cancer.

What happens the day of surgery?

Your appointment will be scheduled early in the day. Our staff will escort you into a surgical suite where we will numb the area around the skin cancer. Once it is numb, the visible cancer and a thin layer of tissue will be removed. This tissue is carefully mapped by the surgeon and taken to our laboratory where the technician will immediately process the microscope slides. You will have a temporary bandage placed over the wound and you will be free to return to the reception area.

The surgical procedure alone takes only 10-15 minutes. However, it takes a minimum of 1 ½ - 2 hours to prepare and microscopically examine the tissues of each layer. Several surgical stages and microscopic examinations may be required, and you will be asked to wait in the patient reception area between stages. Although there is no way to tell before surgery how many stages will be necessary, most skin cancers are removed in three stages or less.

We would like to make the time you spend with us as pleasant and comfortable as possible. You may want to bring reading material, a digital music player with earbuds or a laptop to occupy your time while waiting for the microscope slides to be processed and examined. You may want to bring a sweater, as the temperature in our office varies. Magazines and beverages will be available in the reception area. If your visit extends through the lunch hour, you may bring a lunch since you are asked not to leave the reception area of our office.

The most difficult part of the procedure is waiting for the results from the laboratory. Since we do not know in advance how much time is necessary to remove the skin cancer and repair the wound, **we ask that you plan to be in the office the entire day and that you make no other commitments. Please be sure to inform your companion/driver of this as well.**

What complications may occur?

Complications after Mohs surgery are rare, but may include a chance of bleeding or infection. For any complications or questions following surgery, please review the written instruction sheet we will provide to you the day of surgery.

Will I be hospitalized?

No, Mohs surgery is performed in a pleasant outpatient surgical suite and you may return home the same day.

Will the surgery leave a scar?

Yes, any form of treatment will leave a scar. However, because Mohs surgery removes as little normal tissue as possible, scarring is minimized. Immediately after the cancer is removed, we may choose:

- (1) to allow the wound to heal itself
- (2) to repair the wound with stitches
- (3) to close the wound with a skin graft or flap. This decision is based on the safest method that will provide the best cosmetic result.

Will I have pain after surgery?

Most patients do not complain of pain. If there is any discomfort, Tylenol is all that is usually necessary for relief.

IMPORTANT REMINDERS

- **DO** advise us as soon as possible if you must cancel or change your appointment.
- **DO** take your prescription medication on schedule. However, please discontinue any self-prescribed blood thinners like aspirin, ibuprofen, etc 10 days prior to your appointment.
- **DO** bathe and wash your hair prior to surgery to minimize the risk of infection.
- **DO** eat a normal breakfast, unless instructed otherwise.
- **DO** dress comfortably and bring a sweater. Our office temperatures vary.
- **DO** plan on being in our office most of the day. **DO NOT** make any other commitments on the day of your surgery.
- **DO NOT** consume any alcohol 48 hours prior to your surgery.

Patient Bill of Rights

A patient has the right to respectful care given by competent personnel.

A patient has the right, upon request, to be given the name of his/her attending practitioner, names of all other practitioners directly participating in his/her care, and names and functions of other health care persons having direct contact with the patient.

A patient has the right to consideration for privacy concerning his/her own medical care program. Case discussion, consultation, examination, and treatment are considered confidential and shall be conducted discreetly.

A patient has the right to have records pertaining to his/her medical care treated as confidential except as otherwise provided by law or third party contractual arrangements.

A patient has the right to know what clinic rules and regulation apply to his/her conduct as a patient.

The patient has the right to expect emergency procedures to be implemented without unnecessary delay.

Patients have the right to good, quality care and high professional standards which are continually maintained and reviewed.

The patient has the right to full information in layman's terms, concerning diagnosis, treatment, and prognosis, including information about alternative treatments and possible complications. When it is not medically advisable to give the information to the patient, it will be given on his/her behalf to the responsible person.

Except for emergencies, the practitioner shall obtain the necessary informed consent prior to the start of the procedure.

A patient or, if the patient is unable to sign informed consent, a responsible person, has the right to be advised when a practitioner is considering the patient as a part of a medical care research program or donor program, and the patient, or responsible person, shall give informed consent prior to actual participation in the program. A patient, or responsible person, may refuse to continue in a program to which he/she has previously given informed consent.

A patient has the right to refuse drugs or procedures, to the extent permitted by statute, and a practitioner shall inform the patient of the medical consequences of the patient's refusal of drugs or procedures.

A patient has the right to medical and nursing services without discrimination based upon age, race, color, religion, sex, national origin, handicap, disability, or source of payment.

The patient who does not speak English shall have access, where possible, to an interpreter.

The clinic shall provide the patient designee, upon request, access to the information contained in his/her medical records, unless access is specifically restricted by the attending practitioner for medical reasons.

The patient has the right to expect good management techniques to be implemented within the clinic. These techniques shall make effective use of the time of the patient and avoid the personal discomfort of the patient.

If an emergency occurs and a patient is transferred to another facility, the responsible person shall be notified prior to transfer.

A patient has the right to examine and receive a detailed explanation of his/her bill.

A patient has the right to expect that the clinic will provide information for continuing health care requirements following discharge and means for meeting them.