

# Common Dermatologic Procedures



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## KEYWORDS

- Dermatologic procedures • Skin biopsy • Punch biopsy • Shave biopsy • Excision
- Curettage • Cryosurgery • Cryotherapy

## KEY POINTS

- Performance of skin biopsies is a fundamental skill for all physicians who manage skin conditions.
- Esthetic procedures comprise a minority of most dermatologists' practices, although a wide array of procedures is available and growing.
- Choice of a biopsy technique is based on the type of skin lesion, anatomic site, and desired histologic information.
- Postoperative care and instructions minimize the risk of complications.

## INTRODUCTION

Procedural training is an essential component of a dermatologist's education and practice. Procedures are performed in an outpatient setting and can range from the basic skin biopsy to advanced flaps and reconstructions. This article reviews common procedures performed by dermatologists, focusing on biopsies, which are also highly relevant and fundamental skills for all physicians who manage skin conditions.

## PATIENT PREPARATION

A thorough preoperative evaluation is required before any procedure. Medical history should include information on drug allergies, current medications, presence of a pacemaker or implantable defibrillator, prosthetic devices, history of wound infections, or postoperative bleeding.

The risk of thrombotic events from discontinuing antithrombotic medications may outweigh the increased risk of bleeding.<sup>1</sup> Patients taking aspirin for primary prevention

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may discontinue use 2 weeks before surgery, but this is not necessary for minor procedures such as biopsies. Some supplements, such as ginkgo and ginseng, can increase the risk of perioperative bleeding and should be discontinued several weeks before surgery.

Commonly used agents for antisepsis are addressed in [Table 1](#).

## SKIN ANESTHESIA

Lidocaine is the most commonly used local anesthetic in dermatologic surgery and has a rapid onset of action and intermediate duration. Longer-acting anesthetics, such as bupivacaine, have a delayed onset and may be used with lidocaine to maximize anesthesia duration.

Epinephrine is often added to local anesthetics to decrease bleeding through vasoconstriction, thereby prolonging anesthesia duration and decreasing systemic absorption of lidocaine. Vasoconstriction onset takes 15 minutes, thus adequate time must be allocated before starting the procedure. Epinephrine should be used cautiously in pregnancy and in patients with severe hypertension, peripheral vascular disease, or narrow-angle glaucoma. Multiple reviews have not identified evidence to support the dogma that epinephrine is contraindicated in the digits, ear, nose, and genitals due to risk of necrosis.<sup>2-4</sup>

Usually 1% lidocaine is used, but 0.5% lidocaine with 1:200,000 epinephrine has been shown to provide equivalent anesthesia to 1% lidocaine with 1:100,000 epinephrine. The maximum safe dosage is generally accepted as 5 mg/kg of 1% plain lidocaine and 7 mg/kg of 1% lidocaine with epinephrine. Refer to [Box 1](#) for strategies to minimize injection site pain and [Table 2](#) for potential injection side effects.

## BIOPSIES

The skin biopsy is an essential procedure for clinical-histopathological correlation. Approaches include shave, saucerization, punch, and incisional biopsies.<sup>5</sup> It is always important to send any sampled specimens for pathologic evaluation.

Biopsies are indicated for suspected neoplastic lesions, for bullous disorders, and to help establish a diagnosis when the cutaneous disorder is unclear.<sup>5</sup> Although in most cases the purpose of a biopsy is to obtain a sample, in some situations the biopsy procedure itself may be curative. There are few absolute contraindications. Biopsies generally should not be performed at an infected site. Caution must be

<b>Agent</b>	<b>Advantages</b>	<b>Disadvantages</b>
Isopropyl alcohol	Inexpensive, commonly used for minor clean procedures, immediate effect	Weak antimicrobial activity, not recommended for extensive procedures, skin must remain wet for 2 min for maximum effect <sup>5</sup>
Chlorhexidine	Broad-spectrum activity against gram-positive and gram-negative organisms, rapid onset and prolonged activity	Should not be used near the ears or eyes due to risk of keratitis and ototoxicity
Povidone-iodine	Broad spectrum antimicrobial activity	Must dry and cannot be wiped off to be effective, skin irritant, leaves residual color

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