

Procedure Recording Form

Minimal Excision Technique for Epidermoid (Sebaceous) Cyst Removal

Patient name: _____ Date: _____ Age: _____

How long has the growth been noted? _____

Symptoms associated with the lesion:

Pain	Yes	No	Bleeding	Yes	No
Drainage	Yes	No	Swelling	Yes	No
Tenderness	Yes	No	Irritation	Yes	No
Itching	Yes	No	Clothing rubs on lesion	Yes	No

Side affected: Right Left

Diameter of lesion _____

Location of lesion _____

Procedure description:

The patient gave informed consent for the procedure. Other options were discussed, and the patient elected to undergo the minimal excision technique. The skin was washed with povidone-iodine solution, and the skin and subcutaneous tissues anesthetized with 2 percent lidocaine with epinephrine. The patient tolerated the anesthesia well. A no. 11 blade was used to create a small skin opening into the cyst cavity. The tips of a hemostat were placed in the cyst cavity, widening the opening and assisting with removal of the cyst contents. The tissues surrounding the cyst were squeezed, forcing the cyst contents out onto gauze. Once the entire cyst contents were emptied and the compression had loosened the cyst wall from the surrounding tissues, the hemostat was placed within the cyst cavity, and the cyst wall was grasped. The cyst wall was delivered through the incision. The wound was examined for any residual cyst wall. Once the entire wall was removed, pressure was applied over the wound.

Entire cyst wall removed	Yes	No	Sent to pathology	Yes	No
Fusiform excision required for complete removal	Yes	No	Suture used to close the wound	Yes	No

Suture material: _____

Complications: _____

Follow-up for wound check: _____

Follow-up for suture removal: _____

Impressions

Plan: Postoperative instructions given.

Pressure to be applied for one to two hours following the procedure.

Bandage to be changed in 24 hours.

Physician: _____ CC: _____

Adapted with permission from Zuber TJ. Office procedures. Baltimore: Lippincott Williams & Wilkins, 1999.