

ACMS Video Library Content Areas

1. Basic surgical techniques
 - a. Taking Mohs stages
 - Convex tissue
 - Eyelid margins, including instrumentation
 - Nail unit, including instrumentation
 - Tumescence technique
 - Periosteum/use of Freer
 - b. Hemostasis
 - a. Vessel ligation
 - b. Thrombin
 - c. Reconstruction
 - i. Suturing
 1. Periosteal tacking sutures
 2. Buried vertical mattress sutures
 3. Approximation of the tarsal plate
 4. Frost suspension suture
 - Purse string closure
 - Eyelid reconstruction
 - Placement and removal of corneal shield
 - Secondary intention
 - Linear –
 - When can this NOT be a full-thickness defect
 - Wedge
 - Advancement flap
 - Canthopexy
 - Canthotomy
 - Transposition
 - Flaps
 - Advancement
 - O to L flap
 - O to T flap
 - Helical rim advancement flap
 - Spiral flap
 - Island pedicle flap
 - Tunneled island pedicle flap
 - Transposition
 - Rhombic
 - Bilobed
 - Trilobed
 - Rotation flap
 - Scalp rotation flap
 - Rieger/dorsal nasal advancement/rotation flap
 - Interpolation
 - Paramedian forehead

- Cheek interpolation flap
 - Postauricular jump flap
 - Flap take-downs
 - Cartilage grafting with interpolation flaps
- Grafts
 - Pinch grafts
 - Cartilage grafting
 - Ear recipient site
 - Nose recipient site
 - Composite graft
 - Bolsters
- 2. Mohs lab
 - a. Processing fatty tissue
 - b. Processing cartilage
 - c. Immunohistochemistry, Rapid IHC – manual technique
 - d. Full-thickness wedge tissue – eyelid, lip
 - How to section and map this tissue
 - Processing wedges
 - e. Processing nail unit tissue
- 3. Cutaneous oncology
 - a. Intralesional
 - i. IL-MTX
 - ii. IL-bleomycin
 - iii. IL-cidofovir
 - b. 5-fu chemowraps
- 4. Bandaging wounds
 - a. Unna boots
 - b. Ear
 - c. Scalp
 - d. Lip
 - e. Eyelid margin
 - f. Large eyelid defects/loss of full lid