

Patient

65-year-old Caucasian male was referred by dermatology for Mohs micrographic surgery for treatment of a nodular basal cell carcinoma on the mid-vertex scalp. His past medical history is notable for radiation treatment of the scalp for tinea capitis and multiple scalp basal cell carcinomas.

Case history

Tumor was cleared with one stage of micrographic surgery. The post-Mohs defect measured 1.8 x 1.5 cm and extended down to the level of the galea.

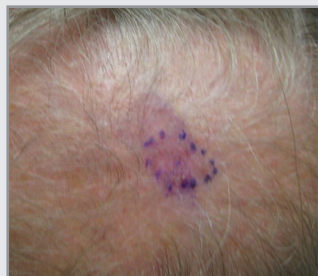
Defect was repaired with an O-to-S rotation flap, which was complicated by dehiscence and necrosis at 3 weeks.

Treatment

After necrotic tissue was debrided and the wound edges were freshened, OASIS Wound Matrix was applied to the open wound base and secured with Steri-Strip[®] closures followed by application of petrolatum, petrolatum gauze, and secondary dressings. Patient was instructed to leave the OASIS Wound Matrix and dressings untouched

for 7 days. After 7 days, treatment transitioned to use of diluted acetic acid and petrolatum until wound closure. Cephalexin 500 mg twice daily was prescribed for 10 days.

At 2 weeks, the wound showed a decrease in size with granulation and caramelisation. By 6 weeks, the wound continued to decrease in size with minimal patient concerns or complaints. At 3-month follow-up visit, the site was well healed with acceptable functional and aesthetic outcomes.



Day 0
Nodular basal cell carcinoma



Day 0
Wound after excision



Day 0
Wound closed with O-to-S rotation flap

After 3 weeks, the flap had necrosed and dehisced. OASIS Wound Matrix was applied to the wound, and the wound was closed.



2 weeks after OASIS Wound Matrix application
Wound shows decrease in size, with wound bed caramelisation



6 weeks after OASIS Wound Matrix application



3 months after OASIS Wound Matrix application

Note: Individual results will vary.
OASIS Wound Matrix is the product name in the US.
OASIS Extracellular Matrix is the product name outside the US.
Steri-Strip is a registered trademark of 3M.