

The Involved Surgical Margin in Keratinocyte Malignancy. The optimal management approach.

Every excised lesion is submitted for histopathology. The result will show margin involvement on occasion. How should this be approached?

Possible options include observation, a field therapy, re-excision, referral for re-excision, re-excision with margin control and adjuvant radiation therapy.

Which option or indeed combination of options is chosen will depend on multiple variables. The site and nature of margin involvement, the histopathology of the excised lesion, the anatomical position, the patient characteristics and the skills and resources of the operator will all inform the decision making process.

The optimal solution will vary.

This ASCA presentation will address the clinical and medicolegal issues that involved margins raise. The talk will be illustrated by case studies and is interactive.

SPEAKERS

Plastic surgeons + Mohs Proceduralists
Radiation Oncologists + General Practitioners
Dermatologists + Dermatopathologists
and experts in the management of perineural invasion.

**Any practitioner involved in skin cancer management
diagnosis will find this talk very useful.**

Special attention will be given to when radiation
is indicated.

Registration

\$50 per GP login

CPD Accreditation

Pending approval with the RACGP for 2hrs EA

Online - Zoom

Link emailed 1-2 days prior

Contact

Please direct all enquiries to jess@mededseries.com.au

**Scan to
register**



**Thu 7 Mar
6:30pm –
8:30pm (AEST)**



MedEd Series
BESPOKE MEDICAL EDUCATION