

# Minor Operations (MOPS)

## Plastic Surgery Department, Level 11, Lister Hospital

The purpose of this leaflet is to explain about your upcoming minor operation in our department. Our goal is to ensure you understand the procedure, feel prepared and are satisfied with your experience. Please read this leaflet carefully and contact us with any questions.

### What is a minor operation?

Your doctor has recommended a procedure under **local anaesthesia**. This may include:

- **Punch biopsy** - A small, circular cut removes a tiny sample of the skin lesion (a few millimetres).
- **Incision biopsy** - A small cut removes a sample of the skin lesion (a few millimetres up to 1–2 centimetres).
- **Excision biopsy** - The entire skin lesion is removed.
- **Wide local excision (WLE)** - The skin lesion is removed along with a margin of healthy tissue.

The first two procedures are primarily for diagnosis. Excision biopsy achieves diagnosis and/or treatment. WLE achieves diagnosis, treatment, and reduces the risk of recurrence of the skin lesion.

### What is the purpose of the biopsy/excision?

The skin sample (specimen) is sent to a laboratory, where it is examined under a microscope to diagnose the lesion. For excision biopsy and WLE, the analysis also confirms whether the entire lesion was removed. The results will guide your next steps in care.

### What happens during the procedure?

- You will be made comfortable on a hospital trolley in the minor operations theatre.
- The team, typically 1–2 surgeons and 1–2 nurses, will introduce themselves.
- A surgeon will review the risks and benefits and ask you to sign a **consent form**.
- The lesion will be marked to plan incisions.
- The area will be numbed with a few injections of **local anaesthetic**, which may sting briefly for a few seconds. You may feel pressure, pulling and tugging, but no sharp pain during the procedure. You will be awake, and more anaesthetic can be added if needed.
- The area will be cleaned with antiseptic solution and draped.
- Depending on the procedure, a small tool or scalpel will remove the skin sample or lesion.
- Bleeding will be controlled using an electrocautery device (you may hear a beeping sound).
- The wound will be closed with stitches; they may or may not be dissolvable depending on the site of the wound.

Afterwards, your nurse will provide wound care and follow-up instructions. You'll go home the same day.

## Risks of the procedure

All procedures carry some risks, including:

- Mild pain or discomfort after the anaesthetic wears off.
- Bleeding or bruising at the site.
- Infection (rare; minimised by sterile techniques).
- Scarring (see below for details).
- Wound healing problems.
- If the laboratory finds the lesion is malignant (i.e. skin cancer) or incompletely removed, you may need further tests or treatment.

We take every precaution to minimise risks and will guide you on spotting and reporting issues.

## Understanding scarring

All MOPS procedures involve a skin cut, leaving a scar:

- **Punch biopsy** - A small scar (a few millimetres).
- **Incision biopsy** - A small straight scar (a few millimetres up to 1–2 centimetres).
- **Excision biopsy/WLE** - A longer scar, larger than the lesion due to removing healthy tissue margins and/or converting a circular lesion to an elliptical wound for neat closure.

Scars mature over 6–12 months but will not disappear completely. Proper wound care (e.g. keeping the area clean) supports optimal healing. You'll receive detailed instructions regarding your postoperative recovery on the day of the procedure. You may consider massaging the area with an unscented moisturiser after complete healing to soften the scar.

## Preparing for your procedure

### Before

- No special preparation is usually needed. Eat and drink normally unless advised otherwise.
- Inform your team about medications or health conditions. You may need to pause blood-thinning medications, as discussed in your consultation. Please contact the department if this had not been discussed with you previously.

### On the day

- Wear comfortable clothing and footwear that allows easy access to the skin lesion.
- Arrive in good time for your procedure, and you will go home afterwards.

### Aftercare

- Keep the wound clean and dry as instructed.
- Avoid strenuous activity for a few days, as advised.
- For surgery in the head and neck area, it is advisable to keep your head elevated at all times for 48–72 hours.
- Follow stitch care instructions (e.g. return for removal if non-dissolvable).
- Contact us if you notice signs of infection (pain, redness, swelling, pus), or have concerns.

## Your experience matters

We aim for your experience to match your expectations and leave you satisfied. This leaflet prepares you for the procedure, recovery, and results. After your operation, we'll check on your recovery and may ask you to complete a short survey to share feedback, helping us to improve care.

## Who do I contact if I have questions to ask?

If you have any questions or concerns, either before or after your procedure, please contact the Plastic Surgery Department at Lister Hospital on the telephone numbers shown below.

**If you have an emergency**, such as severe pain, bleeding, or signs of infection visit your local Emergency Department (A&E) and mention you recently underwent a minor operation in the Plastic Surgery Department at Lister Hospital.

## Useful contact details

### East and North Hertfordshire Teaching NHS Trust:

- Website [www.enherts-tr.nhs.uk](http://www.enherts-tr.nhs.uk)
- Telephone 01438 314333

### Dressing Clinic, Level 11, Lister Hospital:

- Telephone 01438 284767

### Minor Ops Theatre, Lister Hospital:

- Telephone 01438284527

## Leaflet information

**You can request this information in a different format or another language; please speak to your doctor or nurse.**

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