Use of QuikClot Combat Gauze during Mohs stages for intraoperative hemostasis

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SURGICAL CHALLENGE

Control of intraoperative hemorrhaging during Mohs surgery can be achieved by various modalities and is typically attained with electrocautery and pressure to the site. Control of hemorrhaging can be difficult to achieve with patients on anticoagulation therapy, on dialysis, and undergoing repairs at highly vascularized sites.

SOLUTION

To aid hemostasis during Mohs surgery, our clinic uses QuikClot Combat Gauze (Z-Medica, LLC, Wallingford, Connecticut). The hemostatic properties of QuikClot is attributed to kaolin, a white mineral found in clay. The main component in kaolin is the mineral kaolinite, which is a hydrous aluminum silicate that activates the intrinsic clotting pathway.

We use QuickClot between Mohs stages and have found that less electrocautery is needed, resulting in less thermal tissue injury. This product has drastically improved hemostasis in patients on dialysis, anticoagulation therapy, and during surgical repair of severe rhinophymas. The gauze can be applied to wounds of various depths, including intramuscularly. The product comes in 2 × 2—cm or 4 × 4—cm sterile squares or in 6-yard rolls that can be cut down to ~1.5 × 1.5—cm sterile squares and then stored in sterile urine cups until use. Optimal results are achieved when the dressing is laid in a single layer over the wound and an overlying pressure dressing is applied (Figs 1 and 2). On average, ~2-3 minutes of pressure with a dressing is adequate to provide hemostasis. QuickClot is not designed to be left in the wound and should not be included in the final dressing;

Fig 1. Intraoperative bleeding before product placement.

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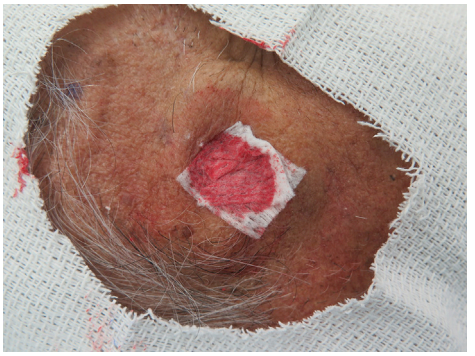

Fig 2. Product placed in wound bed intraoperatively to control hemostasis, before placement of pressure dressing.

QuickClot should be removed with forceps before closure. The cost, on average, is about $0.22 USD per Mohs surgery case. We have seen no side effects or adverse events while using this product. We have found QuikClot to be a cost-effective and useful adjunct to control bleeding intraoperatively during Mohs stages.