



DERMATOLOGYINSTITUTE

FOR SKIN CANCER + COSMETIC SURGERY

"Dedicated to healthy and beautiful skin"

David T. Harvey, MD, FAAD, FACMS

J. Stephen Nobles, PA-C

Katie Belle Glendye, ME, CLT

60 Oak Hill Blvd, #201 Newnan, GA 30265

1075 Lafayette Pkwy, #240 LaGrange, GA 30241

Ph.: 770-400-8400 Fax: 770-400-8401

www.DermInstituteMD.com

Dedicated to healthy and beautiful skin

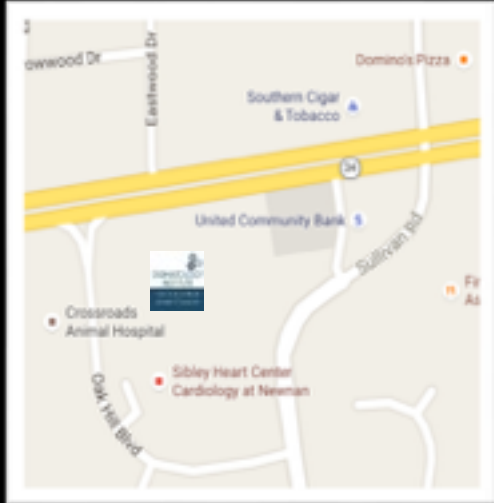
Welcome to the Dermatology Institute For Skin Cancer + Cosmetic Surgery.

We pride our self in delivering quality care in a personal and friendly environment. Our facilities are AAAASF certified, a factor which helps to ensure that patient safety and high standards are followed with each procedure.

Our exemplary team is dedicated to addressing all of your questions and concerns with expertise, kindness and compassion. We're proud to have worked with satisfied patients in Atlanta, Newnan, Peachtree City, Senoia, LaGrange, Fayetteville, and Tyrone, Georgia as well as from Opelika and Auburn, Alabama. We look forward to helping you and your family!

Dr. Harvey

Newnan Office



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LaGrange Office



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LaGrange GA 30241
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Friendly and Courteous Staff



What We Treat

- ❖ Dermatology Conditions (Rashes, Warts, Hair and Nail Disorders, Growth Removal)
- ❖ Skin Cancer (Complete Skin Examinations, Mohs Surgery, Standard Excisions, Topical Chemotherapy)
- ❖ In Office Pathology (Turnaround time is usually 24 to 48 hours)
- ❖ Cosmetic Dermatology (Cosmetic Injectables (Botox™ & Fillers), Leg Vein Treatments, Scar Revisions, Aesthetician Services (Facials, Laser Hair Removal, Micro-needling, IPL, Chemical Peels, Dermatology Skin Care Guidance, VelaShape™ Body Contouring, RF Tightening of Skin))
- ❖ Cosmetic Surgery (Scar Revision, Facelifts, Liposuction, Eyelid Surgery, Laser Resurfacing, Face and Neck Tightening, Hair Transplants)

David T. Harvey, MD, FAAD, FACMS

Treasurer, Georgia Society of Dermatology & Dermatologic Surgery

Board Certified in both Dermatology and Internal Medicine

Fellowship Trained Mohs Surgeon

Over 20 years experience in Dermatology & Cosmetic Surgery

Fellow, American College of Mohs Surgery

Fellow American Academy of Cosmetic Surgery

Peer Reviewer, American Society of Mohs Surgery

Past President, Florida Society of Dermatology

Past President, Florida Society of Dermatologic Surgeons

Course Director, "Advances in Dermatologic Surgery"

Married, father of two- enjoys travel and spending time with family



Dr. David T. Harvey

Steve Nobles, PA-C

Over 13 years experience in Dermatology

Masters Degree PA Studies
University of Nebraska

Expert in Skin Cancer Diagnosis, Skin Exams,
Rash Evaluation and Treatment

Enjoys playing keyboards and reading



Steve Nobles, PA-C

Katie Belle Glendye, ME, CLT

Certified Laser Technician/Aesthetician

Over 5 years experience in dermatology and cosmetic procedures

Specializes in Laser Hair Removal, IPL, Dermaplaning, VelaShape™ Body Contouring, Micro-needling, Medical Grade Facials and RF treatments

Enjoys Braves games and spending time with her family



Katie Belle

Examples of Dermatology Conditions



Hair Loss



Psoriasis



Warts



Eczema

Skin Cancer Types



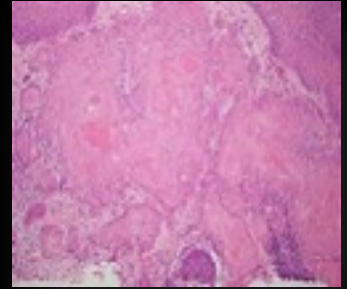
Basal Cell Cancer



Melanoma



Squamous Cell Cancer



SCC Pathology

Sun Protection Tips

Sunscreen Tips



Wearing sunscreen is important because it protects the skin from UVA and UVB rays, which cause **sunburns** and contribute to **skin cancer**.

If you are heading to the beach or pool this summer, take a look at the following tips from **Dave Harvey, M.D.**, a dermatologist at Piedmont, to stay happy and healthy under the sun.



Try to use a **Broad Spectrum** sunscreen, which protects against UVB and UVA rays.

Make sure your sunscreen is at least an **SPF 30** or higher. A 30 SPF sunscreen gives you about 96% to 97% protection from the sun.



Use a clear gel-based sunscreen when doing outdoor activities or at the pool. They should be labeled "water resistant" and will not sweat off as easily.

Always apply sunscreen 15 to 20 minutes before you venture outdoors and reapply every 2 hours. Look for sunscreens that contain micronized zinc oxide, Helioplex, mexoryl or avobenzone.

Don't forget to use a sunscreen on cloudy days. Clouds are not effective in blocking UV rays and that sunscreen use is still essential.



Be aware of reflective surfaces such as water, sand, surf, snow, and high altitudes. The sun can reflect off snow, sand, concrete and water surfaces like a mirror. Even in water, you are not immune against the sun's damaging effects.

Keep infants out of the sun. Babies should not experience prolonged sunshine for at least the first six months of their life. Physical blocks such as Zinc Oxide or Titanium Dioxide are safe because they do not react with the baby's sensitive skin. Clothing lines such as Solumbra™, Coolibar™, or Sun Precautions™ are also safe.



Top Performing Sunscreens Consumer Reports (2016)

- 1 La Roche-Posay Anthelios 60 Melt-In Sunscreen Milk lotion
- 2 Pure Sun Defense SPF 50 lotion
- 3 Banana Boat SunComfort Continuous Spray SPF 50+
- 4 Aveeno Protect + Hydrate SPF 30
- 5 No-Ad Sport SPF 50 lotion

** We have no financial interest in any of the products mentioned above*



Mohs Surgery

REVIEW ARTICLES

Mohs Micrographic Surgery of the Eyelid: An Overview of Anatomy, Pathophysiology, and Reconstruction Options

Steven T. Harvey, MD,* R. Iwan Tomic, MD,* Kristi M. Rice, MD,* and
Ramesh J. Lamminta, MD†

BACKGROUND: Mohs micrographic surgery (MMS) is the ideal treatment for skin cancer removal. The advantages of MMS in the eyelid area include its high cure rate, tissue-sparing effects, and maximal cost effectiveness.

OBJECTIVE: To review eyelid anatomy, detect nodular tumors that are amenable to MMS, and examine the surgical repair options optimally used in this area.

CONCLUSIONS AND RELEVANCE: A review of the literature on MMS of the eyelid was performed with specific reference to eyelid anatomy, eyelid malignancy types, and surgical reconstruction.

CONCLUSIONS: Eyelid function is critical for the maintenance of ocular health and vision. MMS is an ideal skin cancer treatment for the delicate structure of the eyelid, where maximal tissue preservation is critical. There are a multitude of reconstruction options to consider after MMS, but have been performed in this area. The choice of repair and surgical outcome depends in part on the surgeon's knowledge of eyelid anatomy and his or her ability to assess the repair requirements of the post-MMS defect. Dermatologic surgeons can effectively work with other specialists to help ensure that their patients receive a cure with maximal ocular function and optimal cosmetics.

The authors have indicated no significant interest with commercial supporters.

Mohs micrographic surgery (MMS) is the eyelid treatment choice for skin cancer removal.¹ The advantages of MMS in the eyelid area include that it has the highest rate of cure for skin cancer recurrence, surgical margin pathology is available within a matter of hours, it has tissue-sparing effects, and it is cost effective.²

When considering the various options for eyelid reconstruction after MMS, it is important to recognize that eyelid anatomy that protects the cornea,³ provides lubrication for the globe, is functional, and has an acceptable cosmetic appearance.^{4,5} The following discussion provides a broad overview of eyelid anatomy, eyelid malignancies that are amenable to

MMS, and reviews some of the eyelid repair options that dermatologic surgeons and other surgical specialists commonly use.

Eyelid anatomy

The eyelid structure plays an integral role in protecting the globe⁶ and serves to ensure normal eye function.⁴ Before eyelid reconstruction of the eyelid, the cornea from one globe and protect against mechanical trauma.^{7,8} The anatomy of the eyelid consists of a complex array of skin, muscles, nerves, and blood vessels. The removal of eyelid skin cancers and the reconstruction procedures after MMS require a fundamental knowledge of eyelid anatomy.⁹

99% cure rate for skin cancer treatment.
Dr. Harvey serves as dermatologist, pathologist and plastic surgeon

Tissue Sparing Technique- Ideal for skin cancers of the head and neck or recurrent tumors

Pathology results within 30 minutes

Our skin closures are completed at the time of removal in 99% of instances. Thus, patients do not need additional time or plastic surgery referral for closure

Dr Harvey specializes in eyelid tumor removal and repairs*

*Harvey, DT et al. Mohs micrographic surgery of the eyelid: An overview of anatomy, pathophysiology and reconstruction options. *Dermatol Surg* 2013;39:673-697.



Mohs Closure by Dr. Harvey



photos c/o D. Harvey

Postop



6 months

Pentagonal Wedge Repair

Mohs Closure by Dr. Harvey



photos c/o D. Harvey

Postop



3 months

Complex Repair

Cosmetic Dermatology Services

1. Cosmetic Injectables (Botox™ & Fillers)
2. Sclerotherapy (Leg Vein Treatment)
3. Laser Hair Removal
4. Intense Pulse Light (IPL) Treatment
5. VelaShape™ Body Contouring
6. Radiofrequency Skin Tightening
7. Facials
8. Micro-needling
9. Chemical Peeling

Dr. Harvey's Background with Injectables

- Over 20 years experience with cosmetic injectables
- National Instructor using advanced techniques
- Teaches residents at the Emory Department of Dermatology
- Moderates and directs the annual cosmetic injectable symposium for the *Advances In Dermatologic Surgery Meeting* in Florida and the *Georgia Society of Dermatology & Dermatologic Surgery Meeting*



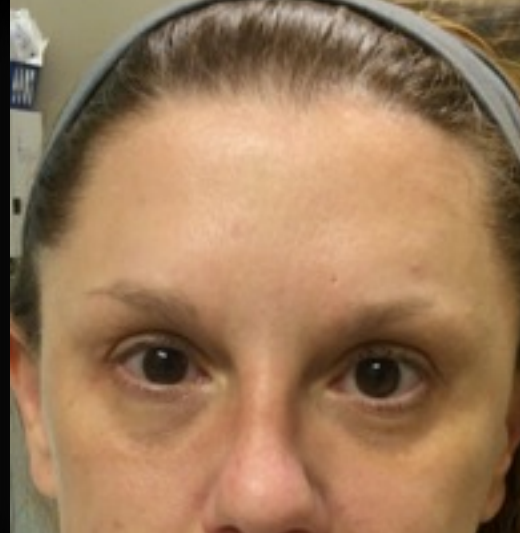
Dr. H Teaching.

Injectables - Lips



Lip augmentation using "soft" dermal fillers as performed by Dr. Harvey.

Botox & Fillers



Combination treatments using Botox Cosmetic™
and fillers can work wonders.

Bellafill™ Filler for Acne Scars



Bellafill™ is the only cosmetic injectable that is FDA approved for acne scars. Benefits can last up to 5 years.

Sclerotherapy



photos c/o D. Harvey



An example of leg sclerotherapy after 2 treatments spaced 4 weeks apart. Procedure performed by Dr. Harvey.

Laser Hair Removal



photos c/o D. Harvey



An example of neck and chin laser hair removal
after 3 treatments spaced 4 weeks apart.

IPL Treatment



An example of face IPL to target age spots,
redness & skin texture.

IPL Treatment



An example of face IPL to target brown spots and rosacea at 3 weeks.

IPL – ALA Treatment



An example of IPL with additive ALA to target pores, precancers and redness. Patients need to stay out of the sun for 48 hours.

Vela Shape™ Body Contouring



An example of VelaShape™ Body Contouring to improve body tone and cellulite. 3 sessions are usually needed.

Cosmetic Surgery Procedures

1. Laser Resurfacing
2. Face Lifts (Quick Lift™)
3. Neck Tightening Procedures
4. Eyelid Procedures (Blepharoplasty)
5. Liposuction
6. Otoplasty (Ear Pinning)
7. Earlobe Repairs

Fractional Laser Resurfacing



Great for acne scars



Note the improvement in this patient's acne scars as performed by Dr. Harvey. No fillers were used on this patient.

Laser Resurfacing



An example of Fractional CO₂ laser to
remove wrinkles on the cheeks as
performed by Dr. Harvey.

Traditional CO₂ Laser Resurfacing



An example of full face CO₂ laser resurfacing as performed by Dr. Harvey.

No facelift surgery was required.

Blepharoplasty



An example of an upper lid blepharoplasty at 2 months postop as performed by Dr. Harvey. Note the improvement in the final symmetry of the upper eyelids.

Thermi RF™ & Neck Lipo



An example of neck liposuction followed by Thermi RF™ at 17 days postop as performed by Dr. Harvey.

Facelift (QuickLift™)



An example of a lower facelift as performed by Dr. Harvey. Note the improvement of neck wrinkles and the reduction of jowls.

Thermi RF™ Tightening



photos c/o D. Harvey



An example of arm liposuction followed by Thermi RF™ as performed by Dr. Harvey. Note the skin retraction at only 60 days postop.

Earlobe Repair – 1 week



photos c/o D. Harvey



An example of left earlobe repair as performed by Dr. Harvey at 7 days postop. Redness & scaling resolved in short order.



*“The only source of
knowledge is experience”*

Einstein