



AMERICAN SOCIETY OF
PLASTIC SURGEONS®

Informed Consent

GENERAL RISKS OF SURGERY

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GENERAL RISKS OF SURGERY

All surgeries, whether elective, cosmetic, or life-saving, carry certain risks and potential complications. These risks not only depend on the type and complexity of the surgery, but also the patient's medical condition, nutritional status, immune responses, and healing ability. Also, a great degree of patient's healing and thus ultimately possible complications is dependent on post-operative care that he or she receives.

Bleeding: It is possible, though unusual, to experience a bleeding episode during or after surgery. Should post-operative bleeding occur, it may require emergency treatment to drain accumulated blood or you may require a blood transfusion, though such occurrences are rare. Also, increased activity too soon after surgery can lead to increased chance of bleeding. If blood transfusions are necessary to treat blood loss, there is the risk of blood-related infections such as hepatitis and HIV (AIDS).

It is important to follow postoperative instructions and limit exercise and strenuous activity for the instructed time. Do not take any aspirin or anti-inflammatory medications for at least ten days before or after surgery, as this may increase the risk of bleeding. Non-prescription “herbs” and dietary supplements can increase the risk of surgical bleeding.

Infection: With any medical procedure, it's possible for infections to occur. Sometimes these infections aren't directly linked to the part of the body that was operated on, such as pneumonia or a urinary tract infection. The seriousness of an infection can vary from relatively minor to life-threatening. If you get an infection, you may need more treatment including antibiotics, hospitalization, or surgery. It is important to tell your surgeon about any current or previous infections you may have had. Your doctor should be told about serious infections, such as methicillin-resistant *Staphylococcus aureus* (MRSA) infections. They can also be less serious like an open wound, a recent upper respiratory infection or pneumonia, an ingrown toenail, an insect bite, a tooth abscess, or a urinary tract infection. Tell your surgeon about any infection or health issue you've had recently. Infections in other parts of the body may lead to an infection in the area where you've had surgery.

Pain: Having pain after surgery is normal. Your surgeon may recommend taking pain medication to reduce your discomfort. This might include prescription pain medication. If you take medication, follow the instructions carefully. These medications can have serious side effects. They may be dangerous if you take too much or may result in addiction (especially in the case of opioids). Please talk to your doctor if you have a history of trouble with any pain medication. Be honest with your doctor about your history with addiction of any kind.

Nausea/Vomiting/Constipation: Having nausea, vomiting and/or constipation is normal after surgery. However, if you experience excessive vomiting, contact your surgeon immediately.

Scar Formation: All surgeries leave scars. Some are more visible than others. While your surgeon will try to make sure your scar is small and thin, everyone heals differently. There is a chance that you may have a more visible scar than others. Some scars may be raised, thick, wide, discolored, uneven, painful, or otherwise not acceptable to you. Scar appearance may also vary within the same scar. Scars may be asymmetrical (appear different on the right and left side of the body). There is the possibility of visible marks in the skin from sutures. In some cases scars may require surgical revision or treatment.

With some surgeries, scar tissue may form around structures deep in the body and cause other issues in the area that's been operated on.

Scar Widening: Incisions that are under frequent movement and tension may heal as thicker or wider scars. This is more common on the back, arms, and outer chest areas.



Swelling: All procedures involve some swelling. The amount of swelling will change depending on the procedure. Your surgeon will recommend ways to reduce swelling. These may include simply waiting for the swelling to go down. Other ways include using special compression clothing, a drain, or medications. If the swelling increases, fluid may collect in your body (called a “seroma”). To fix this, your surgeon may suggest a procedure to drain the fluid. In rare cases, swelling can be permanent (called “lymphedema”).

Change in Skin Sensation: Many people experience changes in skin sensation after surgery. In other words, touching things may feel different than it used to. Such changes usually involve being less sensitive to touch. However, it’s also possible that you may become more sensitive. While these changes usually go away as you start healing, some changes may be permanent.

Stitches: You may see stitches after your surgery. The stitches may poke through your skin. They may even irritate your skin. You may need to have them removed.

Skin Contour Irregularities: Skin and contour irregularities may occur after surgery. Visible and palpable wrinkling of skin may occur. Residual skin irregularities at the ends of the incisions or “dog ears” are always a possibility when there is excessive redundant skin. This may improve with time, or it can be surgically corrected.

Skin Discoloration: Some bruising may normally occur. The skin in or near the surgical site can appear either lighter or darker than surrounding skin. Although uncommon, skin discoloration may persist for long periods of time and, in rare situations, may be permanent.

Firmness: Excessive firmness can occur after surgery due to internal scarring. The occurrence of this is not predictable. Additional treatment including surgery may be necessary.

Skin Sensitivity: Itching, tenderness, or exaggerated responses to hot or cold temperatures may occur after surgery. Usually this resolves during healing, but in rare situations it may be chronic.

Sutures: Most surgical techniques use deep sutures. You may notice these sutures after your surgery. Sutures may spontaneously poke through the skin, become visible or produce irritation that requires suture removal. Occasionally, sutures can become infected and present as a suture abscess. These usually open up as a small wound that will require dressing change.

Fat Necrosis: Suturing involves sewing fatty layers together. As a result, fatty tissue found deep in the skin might die. This may produce areas of firmness within the skin. Additional surgery to remove areas of fat necrosis may be necessary. There is the possibility of contour irregularities in the skin that may result from fat necrosis.

Seroma: Infrequently, fluid may accumulate between the skin and the underlying tissues following surgery. Should this problem occur, it may require additional procedures for drainage of fluid.

Asymmetry: Symmetrical body appearance may not result after surgery. Factors such as skin tone, fatty deposits, skeletal prominence, and muscle tone may contribute to normal asymmetry in body features. Most patients have differences between the right and left side of their bodies before any surgery is performed. Additional surgery may be necessary to attempt to minimize asymmetry.

Surgical Wetting Solutions: There is the possibility that large volumes of fluid containing dilute local anesthetic drugs and epinephrine that is injected into fatty deposits during surgery may contribute to fluid overload or systemic reaction to these medications. Additional treatment including hospitalization may be necessary.



Persistent Swelling (Lymphedema): Persistent swelling in the arms and hands or legs can occur following arm or thigh surgery, respectively.

Delayed Healing: Certain medical conditions, dietary supplements and medications may delay and interfere with healing. Obese patients or massive weight loss patients may also have a healing delay that could result in the incisions coming apart, skin death, infection, and tissue damage, resulting in the need for additional medical care, surgery, and hospitalizations. Patients with diabetes or those taking medications such as steroids on an extended basis may also have prolonged healing issues. Individuals who have decreased blood supply to tissue from past surgery or radiation therapy may be at increased risk for delayed wound healing and poor surgical outcome.

Smokers have a greater risk of skin death and wound healing complications due to the effect of Nicotine in reducing blood circulation to the healing tissue.

There are general risks associated with healing such as swelling, bleeding, and the length of surgery and anesthesia that include a longer recovery and the possibility of additional surgery, prolonged recovery, color changes, shape changes, infection, not meeting goals and expectations, and added expense to the patient.

Wounds: With any surgery, there is a chance that delayed healing, or suture abscess, or excessive movements, or lack of post-operative care, may result in separation of the incision. This presents itself as an opening or a wound. Once a wound opens up, the wound becomes contaminated by the bacteria that normally reside on your skin or other sources. Thus, an open wound is no longer a sterile incision and will require frequent dressing changes to keep it clean. Depending on the size of the wound, your surgeon may recommend ways to help you heal. These can include wound care with dressing changes, special devices to help the wound close faster, or operations to clean or close the wound. Sometimes, a wound may affect the results of your surgery, both in terms of how it looks and how it performs. Certain health problems and medications may lead to wound formation. Please tell your doctor about all your known or possible medical issues. Also let your doctor know every medication, herb, and supplement you're taking. Tell your doctor about your eating habits and if you're on a specific diet like Atkins or keto. Don't forget to tell your doctor whether you smoke, or you used to smoke. Smoking and nicotine can make it harder for your body to heal, resulting in wound problems.

Painful Neuroma: There are nerve endings that may become involved with healing scars after surgery. The small nerve endings during the healing period may become too active producing a painful or oversensitive area due to the small sensory nerve involved with scar tissue. Often massage and early non-surgical intervention resolves this. It is important to discuss post-surgical pain with your surgeon.

Skin Relaxation: Patients with significant skin laxity will continue to have the same lax skin after surgery. The quality or elasticity of skin will not change and some degree of tissue laxity will re-occur as swelling subsides and tissues settle post-operatively. This is typically noted at about 6 months and is relatively minor relative to the degree of enhancement and correction.

Injury to Deep Vital Structures: When you have surgery, there is a risk that other organs and systems may be injured. These important systems are called "deep vital structures," and they include the bowel or gut, lungs, muscles, nerves, blood vessels, and other parts of the body. Injuries to these parts can lead to severe infections, bleeding, trouble breathing, organ failure, or even death. Treating such injuries may require more surgeries or time in the hospital.

Drain Breakage: Drains are placed at the site of surgery to prevent seroma formation. Rarely, one of your drains may break at the time of removal. If that happens, exploration of the surgical site may be needed in order to remove



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any broken segment.

Pain Catheter Breakage: Rarely, pain catheters may break at the time or removal after surgery. If that happens, exploration of the surgical site may be needed in order to remove any broken segment.

Blood Clotting Issue that Could be Life-Threatening:

Sometimes surgery can cause issues with your blood vessels, including clotting. In most cases, these fix themselves without needing treatment. However, some procedures have a higher risk of developing blood clots than others, particularly in deeper veins. If a clot forms in a deep vein, it is called deep vein thrombosis (DVT). It can lead to chronic swelling. If the blood clot breaks off and travels to the lungs, it is called pulmonary embolism (PE). PE can be very dangerous. If DVT/PE occurs, you may be given medication to “dissolve” the clot. This medication may increase your risk of bleeding. It is important to tell your surgeon if you or your family have a history of DVT/PE. Discuss your medical history with your surgeon, because some issues may increase your risks. These include taking some types of birth control or estrogen pills, obesity, history of cancer, history of inflammatory bowel disease, etc.

Reactions/Allergies to Medications and Supplies: All medical procedures use a range of medications and supplies. Your body may react to some supplies, including tape, glue, sutures, or garments. These reactions include allergies. Allergies can be minor (itching), moderate (rash), or severe. Severe allergies may result in death (including shock or swelling in your mouth and throat that prevents you from breathing normally). Tell your doctor about any previous allergic reactions you may have had, no matter how mild they were. Medications can also lead to allergies or other reactions. Certain medications, including those used for local or general anesthesia, may affect the heart, lungs, brain, kidneys, liver, or other body functions. These reactions may be life-threatening.

Surgical Anesthesia: Both local and general anesthesia involve risks. There is a possibility of complications, injury, and even death from all types of surgical anesthesia or sedation. Please let your surgeon know about all health issues you may have, especially those that involve how your heart and lungs work. It’s also important to tell your doctor about your overall fitness level, because this can affect how anesthesia works on you.

Cardiac and Pulmonary Complications: Pulmonary complications may occur secondarily to both blood clots (pulmonary emboli), fat deposits (fat emboli) or partial collapse of the lungs after general anesthesia. Pulmonary emboli can be life-threatening or fatal in some circumstances. Inactivity and other conditions may increase the incidence of blood clots traveling to the lungs causing a major blood clot that may result in death. It is important to discuss with your physician any past history of swelling in your legs or blood clots that may contribute to this condition. Cardiac complications are a risk with any surgery and anesthesia, even in patients without symptoms. If you experience shortness of breath, chest pain, or unusual heart beats, seek medical attention immediately. Should any of these complications occur, you may require hospitalization and additional treatment.

Shock: In rare circumstances, your surgical procedure can cause severe trauma, particularly when multiple or extensive procedures are performed. Although serious complications are infrequent, infections or excessive fluid loss can lead to severe illness and even death. If surgical shock occurs, hospitalization and additional treatment would be necessary.

Inability to Follow Instructions Before and After the Procedure: With any procedure, your surgeon will give you instructions to follow the surgery. Following these instructions will help you heal faster. It will reduce your risk of complications and increase the chance of a good result.

Such instructions may include telling you how to take care of your bandages or dressings. They may limit activities, including exercise, lifting, fast movements, bathing, sun exposure, or traveling. Your doctor may make suggestions about the clothes you wear. You may also get instructions about the medications and supplements to take and what to eat. It is very important for you to follow these instructions. If you can’t follow any of the instructions you’ve been given, it’s important to tell your surgeon. Not following your doctor’s instructions can cause problems with healing and may affect the results of your surgery.



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Personal and vocational activity needs to be restricted. Protective dressings and drains should not be removed unless instructed by your plastic surgeon. Successful post-operative function depends on both surgery and subsequent care. Physical activity that increases your pulse or heart rate may cause bruising, swelling, fluid accumulation and the need for return to surgery. It is wise to refrain from intimate physical activities after surgery until your physician states it is safe. It is critical that the patient keeps follow up visit appointments, failure to return for follow up appointments and failure to come in for a check-up when the patient is advised may result in complications and permanent damage.

Follow all physician instructions carefully; this is essential for the success of your outcome.

Unsatisfactory Result: Although good results are expected, there is no guarantee of the final results of the surgery. Everybody is different and nobody is perfectly symmetrical or even. Your surgeon may not know in advance about some of these natural issues. Many issues with unevenness can't be fully corrected with surgery. The more realistic your expectations are, the better your results will be. Some patients never reach their desired goals or results, but this is not the fault of the surgeon or operation. You may be disappointed with the results of surgery. A range of results can happen after surgery. These can sometimes include unevenness, unexpected shape and size, loss of function, wounds, poor healing, scars, changes in appearance, or loss of feeling. It is also possible that the issue for which you had surgery could come back. You may choose to have more surgery to get a result you are happy with.

It can be stressful to have a result you don't like. Before surgery, talk with your surgeon about any concerns you have. Also, tell your doctor if you have a history of depression or mental health disorders. Although many people are happy after surgery, it's impossible to predict what effect surgery may have on your mental health.

NEED FOR ANOTHER SURGERY (RE-OPERATION)

Many things may affect the results of your surgery, both now and in the future. It is unknown how your tissue may respond or how wound healing will occur after surgery. Secondary surgery may be necessary to perform additional tightening or repositioning of body structures. Should complications occur, additional surgery or other treatments may be necessary. Even though risks and complications occur infrequently, the risks cited are particularly associated with this surgery. Other complications and risks can occur but are even more uncommon. The practice of medicine and surgery is not an exact science. Although good results are expected, there is no guarantee or warranty expressed or implied, on the results that may be obtained. In some situations, it may not be possible to achieve optimal results with a single surgical procedure. This may require multiple surgical sessions to produce a final outcome.

There may be additional costs for additional procedures like this. This would include surgical fees, facility and anesthesia fees, and pathology and lab testing. The patient should clarify with their surgeon who is responsible for payment of any additional surgery.



ATTESTATIONS/CONFIRMATIONS

Smoking, Second-Hand Smoke Exposure, Nicotine Products (Patches, Gum, Nasal Spray):

If you currently smoke or use tobacco or nicotine products (including a patch, gum, or nasal spray), or if you are exposed to second-hand smoke, you have a bigger risk of problems during and after surgery. These problems may include skin loss, delayed healing, and more scarring. Additionally, smoking may cause problems with anesthesia and recovery from anesthesia. It can also lead to coughing and increased bleeding. People who don't smoke or use any nicotine-containing products and who don't experience second-hand smoke have a much lower risk of these types of problems. The risks associated with smoking other substances such as Marijuana, are not known at this time. Please let us know about your current smoking and nicotine status below:

___ I am a non-smoker and do not use nicotine products. I understand the potential risk of second-hand smoke exposure that can lead to surgical complications.

___ I am a smoker or use tobacco/nicotine products. I understand the risk of surgical complications due to smoking or use of nicotine products.

___ I have smoked in the past and stopped approximately _____ ago. I understand I may still have the effects and therefore risks from smoking in my system, if not enough time has passed.

___ I have been advised to stop smoking immediately. I have been told about the risks, benefits, expectations, and alternatives to my surgery if I keep smoking.

It is important that you don't smoke for at least 6 weeks before surgery. Don't start smoking again until your doctor tells you it's okay to start. If possible, use this time to help you quit for good.

You must tell your doctor if you keep smoking in the 6 weeks before your surgery. For your own safety, your surgeon may move your operation to a later date if you keep smoking during this time.

Smoking can have a very negative effect on your surgery. Because of this, it's important to check that you have stopped smoking before surgery. Your doctor may do a urine or blood test just before surgery to see if you have nicotine in your body. If the test comes back positive, your surgery may be cancelled. Be honest with your surgeon about whether you smoke or use nicotine products—it's for your own safety.

Sleep Apnea/CPAP:

Tell your doctor if you have breathing problems such as "obstructive sleep apnea." Also, tell you doctor if you use a CPAP device (continuous positive airway pressure), or nighttime oxygen. If you do, you may have a bigger risk of breathing problems or even death during and after surgery. This also increases the risk involved with taking certain pain medications after surgery. It's important for your doctor to know about any pre-existing health issues to find out if surgery is safe for you. If you have a breathing condition, your doctor may suggest that you have surgery only if you stay in the hospital for a little while afterward. This may decrease your risk of potential breathing problems. It will also allow health care providers to safely manage pain after your surgery.

Please think about the following symptoms of sleep apnea:

___ I am frequently tired on waking and during the day



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- I have trouble staying asleep at night
- I have been told that I snore or stop breathing when I sleep
- I wake up throughout the night or constantly turn from side to side
- I have been told that my legs or arms jerk when I'm sleeping
- I make sudden snorting noises when I sleep
- I feel tired or fall asleep during the day

It's important that you talk with your surgeon if you have experienced any of the symptoms listed above.

DVT/PE Risks:

Every surgery has a risk of blood clots, DVT, and PE. This varies depending on the risk factors listed below. The higher the risk factors, the greater the chance you'll experience blood clotting issues during or after surgery. It's important for you to be aware of these risks and to follow your doctor's instructions. Be sure to move about when your doctor allows it. Follow all instructions about activity and movement after surgery. In order to lower your risk of clot-related issues, your doctor may also give you other instructions. You may need to wear special leg stockings, use squeezing active leg devices, or take certain medicines as you heal.

Many conditions can increase or affect your risks of clotting. Tell your doctor about any past or present history of any of the following:

- Personal history of blood clots
- Family history of blood clots
- Taking birth control pills
- Taking hormone stimulating drugs
- Swollen legs
- History of cancer
- Taking a large dose of vitamins
- Varicose veins
- Past illnesses of the heart, liver, lungs, or gastrointestinal tract (Gut)
- History of multiple spontaneous abortions or miscarriages

I understand the risks relating to DVT/PE, and how important it is to follow my surgeon's instructions. These instructions may include:

- Walking or moving my legs as soon as I'm told to ("early ambulation")
- Using compression devices (SCD/ICD)
- Using certain medications or procedures (like "anticoagulation protocols") when allowed

If you have a high risk of clotting issues, you may experience some problems even if your doctor uses preventive methods. If your surgery is not medically required (it's "elective") and you are a high-risk patient, it may be safer to not have the surgery. You should talk about these risks with your surgeon.

RISKS ASSOCIATED WITH OBESITY:

Patients who are overweight have a higher rate of many complications and this risk increases the more overweight the patient is. The patient should discuss these risks with their surgeon and discuss ways to decrease these risks. Obese patient are at a higher risk of healing problems, seroma formation, and infections.



RISKS ASSOCIATED WITH MASSIVE WEIGHT LOSS/ EXTREME DIETING: You may be nutritionally deficient following massive weight loss, or extreme weight loss, or diet low in proteins and vitamins. Individuals with abnormalities may be at risk for medical and surgical complications, including delayed wound healing and infection.

ADDITIONAL ADVISORIES

Medications and Herbal Dietary Supplements: There are potential adverse reactions that occur as the result of taking over-the-counter, herbal, and/or prescription medications. Aspirin and medications that contain aspirin interfere with clotting and can cause more bleeding. These include non-steroidal anti-inflammatories such as Motrin, Advil, and Alleve. It is very important not to stop drugs that interfere with platelets, such as Plavix, which is used after a stent. It is important if you have had a stent and are taking Plavix that you inform the plastic surgeon. Stopping Plavix may result in a heart attack, stroke and even death. Be sure to check with your physician about any drug interactions that may exist with medications which you are already taking. If you have an adverse reaction, stop the drugs immediately and call your plastic surgeon for further instructions. If the reaction is severe, go immediately to the nearest emergency room. When taking the prescribed pain medications after surgery, realize that they can affect your thought process and coordination. Do not drive, do not operate complex equipment, do not make any important decisions and do not drink any alcohol while taking these medications. Be sure to take your prescribed medication only as directed.

Sun Exposure – Direct or Tanning Salon: The effects of the sun are damaging to the skin. Exposing the treated areas to sun may result in increased scarring, color changes, and poor healing. Patients who tan, either outdoors or in a salon, should inform their surgeon and either delay treatment, or avoid tanning until the surgeon says it is safe to resume. The damaging effect of sun exposure occurs even with the use sun block or clothing coverage.

Travel Plans: Any surgery holds the risk of complications that may delay healing and delay your return to normal life. Please let the surgeon know of any travel plans, important commitments already scheduled or planned, or time demands that are important to you, so that appropriate timing of surgery can occur. There are no guarantees that you will be able to resume all activities in the desired time frame.

Long-Term Results: Subsequent alterations in the appearance of your body may occur as the result of aging, sun exposure, weight loss, weight gain, pregnancy, menopause or other circumstances not related to your surgery.

Body-Piercing Procedures: Individuals who currently wear body-piercing jewelry in the surgical region are advised that an infection could develop from this activity.

Female Patient Information: It is important to inform your plastic surgeon if you use birth control pills, estrogen replacement, or if you suspect you may be pregnant. Many medications including antibiotics may neutralize the preventive effect of birth control pills, allowing for conception and pregnancy.

Intimate Relations After Surgery: Surgery involves coagulating of blood vessels and increased activity of any kind may open these vessels leading to a bleed, or hematoma. Activity that increases your pulse or heart rate may cause additional bruising, swelling, and the need for return to surgery and control bleeding. It is wise to refrain from intimate physical activities until your physician states it is safe.

Mental Health Disorders and Elective Surgery: It is important that all patients seeking to undergo elective surgery have realistic expectations that focus on improvement rather than perfection.



Complications or less than satisfactory results are sometimes unavoidable, may require additional surgery and often are stressful. Please openly discuss with your surgeon, prior to surgery, any history that you may have of significant emotional depression or mental health disorders. Although many individuals may benefit psychologically from the results of elective surgery, effects on mental health cannot be accurately predicted.

HEALTH INSURANCE

Most health insurance companies exclude coverage for cosmetic surgical operations or any resulting complications. Please carefully review your health insurance subscriber-information pamphlet.

FINANCIAL RESPONSIBILITIES

The cost of surgery involves several charges for the services provided. The total includes fees charged by your surgeon, the cost of surgical supplies, anesthesia, laboratory tests, and possible outpatient hospital charges, depending on where the surgery is performed. Depending on whether the cost of surgery is covered by an insurance plan, you will be responsible for necessary co-payments, deductibles, and charges not covered. The fees charged for this procedure do not include any potential future costs for additional procedures that you elect to have or require in order to revise, optimize, or complete your outcome. Additional costs may occur should complications develop from the surgery. Secondary surgery or hospital day-surgery charges involved with revision surgery will also be your responsibility. **In signing the consent for this surgery/procedure, you acknowledge that you have been informed about its risks and consequences and accept responsibility for the clinical decisions that were made along with the financial costs of all future treatments.**

___ I understand that with cosmetic surgery, I am responsible for the surgical fees quoted to me, as well as additional fees for anesthesia, facility (OR), and possibly laboratory, X-ray, and pathology fees.

Surgicenters, Outpatient Centers, and Hospitals often have rules that certain tissue/implants removed during surgery must be sent for evaluation which may result in additional fees. Please check with your surgeon to receive an estimate of any additional costs that you may be charged.

DISCLAIMER

Informed consent documents give you information about a surgery you are considering. These documents explain the risks of that surgery. They also discuss other treatment options, including not having surgery. However, informed consent documents can't cover everything. Your plastic surgeon may give you more or different information. This may be based on the facts of your case.

Informed consent documents are not meant to define or serve as the standard of medical care. Standards of medical care are determined based on the facts involved in an individual case. They may change with advances in science and technology. They can also change with the way doctors practice medicine and evolve.

It is important that you read the above information carefully and get all your questions answered before signing the procedure-specific risks of surgery consent agreement.



CONSENT FOR SURGERY / PROCEDURE or TREATMENT

I understand that the general complications mentioned in this document pertains to any plastic or reconstructive surgery and that there may be additional procedure specific complications.

I CONSENT TO THE PROCEDURE OR PLANNED SURGERY AND AM SATISFIED WITH THE EXPLANATION.

Patient or Person Authorized to Sign for Patient

Date _____ Witness _____

___ **DISCLOSURE:** Dr. Agha and his staff have given me full disclosure regarding my surgery. I understand what I am having done and the extent of surgery provided.

___ **QUESTIONS:** I have had a chance to ask all the questions I have requested and have been satisfied with the answers given. I am free to ask questions at any time. I have no further questions at this time.

___ **BENEFITS:** The benefits have been fully disclosed and I completely understand them. They include improved comfort, a more pleasing appearance, confidence in personal appearance, possibly less pain and discomfort.

___ **RISKS:** The risks have been fully disclosed and I completely understand and accept these risks.

___ **OPTIONS: Please initial**

Since this is elective surgery I have had the chance to research other surgeons and surgical approaches. The options of care have been fully discussed such as outside consultations and surgery, no surgery, expectant management (wait and see), medical management, or to proceed with the agreed upon surgery. I have chosen to proceed with the elective surgery willingly and without hesitation at the time frame of my choosing.

___ I understand that every individual heals differently

___ I understand that successful surgical results is not only dependent on the surgical technique but also on my body’s ability to heal and my compliant with the post-operative instruction

___ I understand that I would be responsible for complying with the given instructions

___ I understand that variable blood supply may hamper proper healing

___ I understand that activities I perform may damage my surgical repair and that strict adherence to my post-op instruction is critical

___ I understand that I am not allowed to have sexual relations until cleared by Dr. Agha

___ I understand that I am not allowed to take a shower or bathe until cleared by Dr. Agha

___ I understand that scarring from reaction to sutures, infections, keloids may occur and that all scars may not be hidden from view or may actually be more prominent depending on the healing process

___ I understand that wound revision(s) or resurfacing procedures may be needed to achieve the desired look and appearance

___ I understand that consultations and revisions performed by other surgeons are my financial responsibility

___ I understand that revisions may not be able to accomplish the cosmetic goals I am seeking

___ I understand that Dr. Agha does not guarantee that he will be able to achieve the results I am seeking. No guarantees have been implied or given.



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I CONSENT TO THE TREATMENT OR PROCEDURE AND THE ABOVE LISTED ITEMS. I AM SATISFIED WITH THE EXPLANATION.

Patient or Person Authorized to Sign for Patient

Date _____ Witness _____

CONSENT TO MULTIPLE PROCEDURES

It is important that you read this information carefully if you are having **multiple procedures and sign the consent for surgery as proposed by Dr. Siamak Agha and agreed upon by you.**

Multiple Surgical Procedures

___ I understand that many facial rejuvenation or body contouring procedures often entail multiple surgeries. I request and consent to having these procedures completed in one surgical setting.

Multiple procedures have higher risks and potential complication

___ I understand that each plastic surgery procedure carries a certain rate of complications. When multiple procedures are combined together, the risks are additive. This obviously means that the rate of complications for multiple procedures is not only dependent on the number of the procedures, but the ability of your body to deal with the healing demand.

Surgery that takes more than 7-8 hours may have a higher rate of both minor and major complications.

___ I understand that body contouring procedures are extensive and complex. Every effort will be made to complete the surgery within 7 to 8 hours. I understand that surgeries that take more than 8 hours may potentially increase my rate of both minor and major complications, as outlined on the given consent form.

___ I request to have surgery that takes more than 8 hours.

Travel Plans and Return Home

___ I understand that optimal healing and results depend on complying with the given instructions. I understand that I will need to stay locally for about 4 weeks after many body contouring procedures, especially lower body lift and thigh lift surgeries. I understand that potential risks and complications would be higher if I travel back home earlier than this period. I understand that I am responsible for all my potential complications if I leave for home sooner than advised by Dr. Agha.

I CONSENT TO THE TREATMENT OR PROCEDURE AND THE ABOVE LISTED ITEMS. I AM SATISFIED WITH THE EXPLANATION.

Patient or Person Authorized to Sign for Patient

Date _____ Witness _____

Narcotic Treatment Agreement

We request your agreement to abide by these guidelines:

1. We will prescribe narcotic pain medication in a responsible manner to help alleviate pain experienced by our patients as a result of a procedure at our clinic. Unrelated pain, chronic pain and other issues should be managed by a pain management specialist.
2. No narcotic prescriptions will be replaced if lost or stolen.
3. No narcotic prescriptions can be refilled by phone, in compliance with state regulations.
4. All narcotic prescriptions must be electronically prescribed and can only be given during normal business hours. This means that adequate planning is important, especially before weekends and holidays.
5. It is the patient's responsibility to:
 - Notify us of any prior history of addiction or drug abuse. This will help us manage your pain more effectively and safely.
 - Notify us of any prescriptions that you receive from another physician.
 - Take medications only as prescribed. Avoid any other narcotics while taking the prescribed medications, unless clearly communicated and agreed to with your doctor.
 - Avoid any other medications unless discussed with your doctor. This specifically includes medications for anxiety/depression or sleep/pain such as Xanax, Ativan, or muscle relaxers. The combination of these drugs mixed with narcotics can cause respiratory depression.
 - Avoid driving or performing any hazardous activity while taking narcotics. You will NOT operate heavy machinery or any vehicle while taking narcotics.
 - Avoid ingesting alcohol or recreational drugs while taking narcotics.
 - Notify us promptly of any possible side effects, or if you feel that you are over-medicated or under-medicated.
 -

Patient Signature: _____

Date: _____

Witness Signature: _____

Date: _____

SURGICAL RESULTS

There are many components to having a successful surgery and lasting results, including:

- 1) The surgery itself.
- 2) Recovery: Your preparation for surgery and follow through with the given post-op instructions
- 3) Your body's ability to heal. Some people are better healers than others. Smokers, people on steroids, older patients, gastric bypass patients, those who are nutritionally deficient (due to diet or weight loss surgery), diabetic patients are not good healers.

RECOVERY AFTER SURGERY

It is paramount that you allocate enough time to healing. Healing after any incision can take up to 6 weeks. At three weeks, the skin is typically healed more than the underlying tissues that require at least 6 weeks to heal. During this time, you are urged to optimize your nutrition for healing, to have help to care for you, and to avoid strenuous movements or activities since these can result in your incisions to open. If you develop separation of your incisions, we can not close the opening with sutures since the separated tissue often times are too fragile and will re-open again. When this happens, we have to wait for your body to heal from inside out. The process may take up to 6 weeks or longer.

Please make sure that you have a care giver after surgery for days to weeks, depending on the type of your surgery. If you are not local and having a tummy tuck or a lower body lift, you **MUST** arrange for a care giver. Lack of help will increase your risk of complications.

If you are out of town, and you leave too early after the surgery, you will increase your risk of openings and having complications. Also, since we will not be able to see you for regular follow ups, it is imperative that you keep in communication with our office after your get home so that we can continue to care for you.

MAINTAINING THE RESULTS OF SURGERY

We believe that the best time to have surgery is at your most stable weight. This is the weight that you are at, on most days of a year.

GAINING WEIGHT

If you have surgery and gain weight, this can distort your final results. Many patients gain weight after a tummy tuck procedure without realizing that they have done so. Even a few pounds of weight gain can become noticeable on thighs or arms or other areas.

If you gain weight after liposuction, areas that have been liposuctioned will not expand as much as areas that have not, since liposuction remove fat cells permanently. This can create distortion of your results and even deformity since some areas will look full (non-liposuctioned areas) and others will not as much (liposuctioned areas).

If you gain weight after any form of fat transfer (hand, face, breasts, mons, buttocks, hips), again you may end up with future expansion of where fat cells have been placed. The transferred fat cells will be able to store fat and will expand, resulting in further augmentation of the treated area. This is especially the case when you have also had liposuction where fat cells are removed from other areas.

If you gain weight after body contouring procedures, then you may end up with unpredictable deformities as a result of a change in your body fat cell distribution and concentration in different areas.

LOSING WEIGHT

If you lose weight after surgery (> 10-20 pounds), you will see skin laxity. Skin laxity presents itself as wrinkles, folds, and even cellulites.

FOLLOW-UPS.

We do not charge for follow ups perpetually. Follow ups are important to the success of a surgery and maintaining the results. We ask you to reach us with your concerns and questions and to attend your follow ups so that we can help you to maintain your results.

Patient or Person Authorized to Sign for Patient

Date _____ Witness _____