

# INFORMED-CONSENT-ABDOMINOPLASTY SURGERY

## **Instructions**

This is an informed-consent document that has been prepared to help your plastic surgeon inform you of abdominoplasty and hernia repair surgery, its risks, as well as alternative treatments.

It is important that you read this information carefully and completely. Please initial each page, indicating that you have read the page and sign the consent for surgery as proposed by your plastic surgeon.

## **Introduction**

Abdominoplasty is a surgical procedure to remove excess skin and fatty tissue from the middle and lower abdomen and to tighten muscles of the abdominal wall. Abdominoplasty is not a surgical treatment for being overweight. Obese individuals who intend to lose weight should postpone all forms of body contouring surgery until they have been able to maintain their weight loss.

There are a variety of different techniques used by plastic surgeons for abdominoplasty. Abdominoplasty can be combined with other forms of body-contouring surgery, including suction-assisted lipectomy, or performed at the same time with other elective surgeries.

## **Alternative Treatments**

Alternative forms of management consist of not treating the areas of loose skin and fatty deposits. Suction assisted lipectomy surgery may be a surgical alternative to abdominoplasty if there is good skin tone and localized abdominal fatty deposits in an individual of normal weight. Diet and exercise programs may be of benefit in the overall reduction of excess body fat.

Risks and potential complications are associated with alternative forms of treatment that involve surgery.

## **Risks of Abdominoplasty Surgery**

Every surgical procedure involves a certain amount of risk and it is important that you understand the risks involved with abdominoplasty. An individual's choice to undergo a surgical procedure is based on the comparison of the risk to potential benefit. Although the majority of patients do not experience the following complications, you should discuss each of them with your plastic surgeon to make sure you understand all possible consequences of abdominoplasty.

## **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 blood transfusion. Do not take any aspirin or anti-inflammatory medications for ten days before surgery, as this may increase the risk of bleeding. Non-prescription "herbs" and dietary supplements can increase the risk of surgical bleeding.

## **Infection**

Infection is unusual after this type of surgery. Should an infection occur, treatment including antibiotics or additional surgery may be necessary. There is a greater risk of infection when body contouring procedures are performed in conjunction with abdominal surgical procedures.

## **Change in Skin Sensation**

Diminished (or loss of) skin sensation in the lower abdominal area may not totally resolve after abdominoplasty.

## **Skin Contour Irregularities**

Contour irregularities and depressions may occur after abdominoplasty. Visible and palpable wrinkling of skin can occur.

## **Skin scarring**

Excessive scarring is uncommon. In rare cases, abnormal scars may result. Scars may be unattractive and of different color than surrounding skin. Additional treatments including surgery may be necessary to treat abnormal scarring.

## **Risks of Abdominoplasty Surgery, Continued**

### **Asymmetry**

Symmetrical body appearance may not result from abdominoplasty. Factors such as skin tone, fatty deposits, bony prominence, and muscle tone may contribute to normal asymmetry in body features.

### **Delayed healing**

Wound disruption or delayed wound healing is possible. Some areas of the abdomen may not heal normally and may take a long time to heal. Some areas of skin may die. This may require frequent dressing changes or further surgery to remove the non-healed tissue. **Smokers have a greater risk of skin loss and wound healing complications.**

### **Allergic Reactions**

In rare cases, local allergies to tape, suture material, or topical preparations have been reported. Systemic reactions which are more serious may occur to drugs used during surgery and prescription medicines. Allergic reactions may require additional treatment.

### **Deeper Sutures**

Some surgical techniques use deep sutures. These items may be noticed by the patient following surgery. Sutures may spontaneously poke through the skin, be visible, or produce irritation that requires removal.

### **Incidental or Known Abdominal Hernia Defect**

An abdominal hernia is an opening or defect in the abdominal wall that may or may not be detected on your initial physical exam and sometimes has no symptoms. If a hernia is noted during, or has been found prior to, a planned abdominoplasty, your surgeon may need to repair the defect. This may include the use of a synthetic mesh. All the risks and complications discussed in this consent also apply to hernia repairs with the addition that hernias can recur even after a thorough repair; pain, discomfort, and recovery time may be increased compared to an abdominoplasty alone; the synthetic mesh may become infected or cause discomfort; and since a hernia repair may require opening of the abdominal lining, on rare occasions abdominal infection, injury to the intestines, temporary decreased function of the intestine (Ileus), intestinal scarring (Adhesions) that may cause obstruction, and bleeding into the abdomen may occur. Any of these complications may lead to further surgery, admission to the hospital, prolonged time without eating, and prolonged recovery.

### **Long-Term Effects**

Subsequent alterations in body contour may occur as the result of aging, weight loss or gain, pregnancy, or other circumstances not related to abdominoplasty.

### **Other**

You may be disappointed with the results of surgery. Infrequently, it is necessary to perform additional surgery to improve your results.

### **Pain**

Chronic pain may occur very infrequently from nerves becoming trapped in scar tissue after abdominoplasty.

### **Pulmonary Complications**

Pulmonary complications may occur secondarily to both blood clots (pulmonary emboli) or partial collapse of the lungs after general anesthesia. Should either of these complications occur, you may require hospitalization and additional treatment. Pulmonary emboli can be life-threatening or fatal in some circumstances.

### **Seroma**

Fluid accumulations infrequently occur in between the skin and the abdominal wall. Should this problem occur, it may require additional procedures for drainage of fluid.

### **Surgical Anesthesia**

Both local and general anesthesia involve risk. There is the possibility of complications, injury, and even death from all forms of surgical anesthesia or sedation.

## **Risks of Abdominoplasty Surgery, Continued**

### **Umbilicus**

Malposition, scarring, unacceptable appearance or loss of the umbilicus (navel) may occur.

### **Additional Surgery Necessary**

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 abdominoplasty and hernia repairs. 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.

### **Health Insurance**

Most health insurance companies exclude coverage for cosmetic surgical operations such as abdominoplasty or any complications that might occur from surgery. 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 doctor, 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. Additional costs may occur should complications develop from the surgery. Secondary surgery or hospital day-surgery charges involved with revisionary surgery would also be your responsibility.

### **Disclaimer**

Informed-consent documents are used to communicate information about the proposed surgical treatment of a disease or condition along with disclosure of risks and alternative forms of treatment(s). The informed-consent process attempts to define principles of risk disclosure that should generally meet the needs of most patients in most circumstances.

However, informed consent documents should not be considered all inclusive in defining other methods of care and risks encountered. Your plastic surgeon may provide you with additional or different information which is based on all the facts in your particular case and the state of medical knowledge.

Informed-consent documents are not intended to define or serve as the standard of medical care. Standards of medical care are determined on the basis of all of the facts involved in an individual case and are subject to change as scientific knowledge and technology advance and as practice patterns evolve.

### **Biomedical Waste**

All human tissue and medical devices that are removed from the patient after surgery will be disposed of as biomedical waste per state and city regulations. In some circumstances and under the sole discretion of the operating surgeon, some discarded tissue may be used for teaching purposes in training medical students or other allied health professionals after which, the tissue will be disposed of as per state and city regulations. Under no circumstances will discarded tissue be utilized as donated tissue for medical or pharmaceutical purposes, or utilized in any for profit venture. If the patient does not agree to have discarded tissue used in any manner other than to be processed solely as biomedical waste, the patient needs to place a line through item 7 on the consent form prior to signing and indicate this to his/her surgeon prior to surgery.

**It is important that you read the above information carefully and have all of your questions answered before signing the consent on the next page.**

**CONSENT FOR SURGERY/ PROCEDURE or TREATMENT**

1. I hereby authorize DR. EDUARDO BARROSO and such assistants as may be selected to perform the following procedure or treatment:

\_\_\_\_\_

I have received the following information sheet:

**INFORMED-CONSENT ABDOMINOPLASTY SURGERY**

2. I recognize that during the course of the operation and medical treatment or anesthesia, unforeseen conditions may necessitate different procedures than those above. I therefore authorize the above physician and assistants or designees to perform such other procedures that are in the exercise of his or her professional judgment necessary and desirable. The authority granted under this paragraph shall include all conditions that require treatment and are not known to my physician at the time the procedure is begun.
3. I consent to the administration of such anesthetics considered necessary or advisable. I understand that all forms of anesthesia involves risk and the possibility of complications, injury, and sometimes death.
4. I acknowledge that no guarantee has been given by anyone as to the results that may be obtained.
5. I consent to the photographing or televising of the operation(s) or procedure(s) to be performed, including appropriate portions of my body, for medical, scientific or educational purposes, provided my identity is not revealed by the pictures.
6. For purposes of advancing medical education, I consent to the admittance of observers to the operating room.
7. I consent to the disposal and possible utilization of any tissue and/or medical devices which may be removed during surgery as detailed in the paragraph "Biomedical Waste".
8. I authorize the release of my Social Security number to appropriate agencies for legal reporting and medical-device registration, if applicable.
9. IT HAS BEEN EXPLAINED TO ME IN A WAY THAT I UNDERSTAND:
- a. THE ABOVE TREATMENT OR PROCEDURE TO BE UNDERTAKEN
  - b. THERE MAY BE ALTERNATIVE PROCEDURES OR METHODS OF TREATMENT
  - c. THERE ARE RISKS TO THE PROCEDURE OR TREATMENT PROPOSED

I CONSENT TO THE TREATMENT OR PROCEDURE AND THE ABOVE LISTED ITEMS (1-9). I AM SATISFIED WITH THE EXPLANATION.

\_\_\_\_\_  
Patient or Person Authorized to Sign for Patient

Date \_\_\_\_\_ Witness \_\_\_\_\_

**PRE-OPERATIVE INSTRUCTIONS**

1. Do not take aspirin or aspirin-containing products, Vitamin E, or any herbal medications known to cause blood thinning for 2 weeks before surgery.
2. Do not smoke for 2 weeks before your surgery.
3. Do not drink alcoholic beverages for 2 weeks before your surgery.
4. Do not eat or drink anything after midnight the night before your surgery.
5. You may brush your teeth the morning of your surgery, BUT DO NOT SWALLOW ANY WATER. If you take any special medications, you may take them the morning of surgery with a small sip of water. Please first check with Dr. Barroso or the Operating Room Nurse when she calls to ask pre-op questions.
6. If you are having a procedure on the face, do not wear any make-up to surgery.
7. Wear comfortable, loose-fitting clothes that DO NOT have to be pulled over your head. No pantyhose, girdles, jeans or high heels, please!

**ABDOMINOPLASTY**  
**POST-OPERATIVE INSTRUCTIONS**

1. Place one or two pillows under your knees when sleeping for the first five days post operatively.
2. Expect your abdomen to be swollen and bruised. It is normal for your skin to feel numb and/or sensitive.
3. Expect your abdomen to feel tight, especially when bending at your waist and turning from side to side. It is normal to feel tightness and a pulling sensation while healing.
4. You should wear the surgical abdominal binder provided for you at all times for the first week following your surgery and a firm girdle for at least three weeks after that. We do not recommend prolonged use of compressive garments after the first month.
5. Avoid all strenuous activity for the first four (4) weeks following surgery. You may walk immediately after surgery and it is recommended that you do not lie in bed for long periods of time. When not walking move your legs and feet as much as possible even while sitting or lying in bed. As soon as you feel well enough, you may go outside your home for leisurely walks, casual shopping, light groceries, etc. You may return to work at two weeks as long as your job duties do not require excess physical force and you are no longer taking narcotics for pain. Do not use any heavy machinery, including driving a motor vehicle, for the first two weeks and/or if you are taking any narcotics for pain control following your surgery.
6. Do not get your stitches wet for the first 48 hours following your surgery. You may then shower. Do not soak in a bath, pool, whirlpool, beach, or any stagnant body of water for the first month.
7. You will be given a prescription for pain medication. Take your medications as directed for pain control.
8. **DO NOT TAKE ASPIRIN.**
9. Do not drink any alcoholic beverages for the first two (2) days following your surgery and then only in moderation until fully healed.
10. If you smoke, **YOU MUST STOP** your smoking for two (2) weeks prior to surgery and for two (2) weeks following your surgery. It is very important for the healing process.