



**INFORMED CONSENT LIPOSUCTION
(SUCTION-ASSISTED LIPECTOMY SURGERY)
(ULTRASOUND-ASSISTED LIPECTOMY SURGERY)**

INSTRUCTIONS

This is an informed consent document that has been prepared to help inform you concerning liposuction surgery (suction-assisted lipectomy and ultrasound-assisted lipectomy), its risks, and alternative treatment.

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 Dr. Barood.

INTRODUCTION

Liposuction is a surgical technique to remove unwanted deposits of fat from specific areas of the body, including the face and neck, upper arms, trunk, abdomen, buttocks, hips and thighs, and the knees, calves, and ankles. This is not a substitute for weight reduction, but a method for removing localized deposits of fatty tissue that do not respond to diet or exercise. Liposuction may be performed as a primary procedure for body contouring or may be combined with other surgical techniques such as facelift, abdominoplasty, or thigh lift procedures to tighten loose skin and supporting structures.

The best candidates for liposuction are individuals of relatively normal weight who have excess fat in particular body areas. Having firm, elastic skin will result in a better final contour after liposuction. Skin that has diminished tone due to stretch marks, weight loss, or natural aging will not reshape itself to the new contours and may require additional surgical techniques to remove and tighten excess skin. Body-contour irregularities due to structures other than fat cannot be improved by this technique. Liposuction by itself will not improve areas of dimpled skin known as "cellulite".

Suction-assisted lipectomy surgery is performed by using a hollow metal surgical instrument known as a cannula that is inserted through small skin incision(s) and is passed back and forth through the area of fatty deposit. The cannula is attached to a vacuum source, which provides the suction needed to remove the fatty tissue.

In some situations, a special cannula may be used that emits ultrasonic energy to break down fatty deposits. This technique is known as **ultrasonic-assisted lipectomy**. Depending on your needs, your surgeon may recommend suction-assisted lipectomy alone, or in combination with ultrasound-assisted lipectomy.

There are a variety of different techniques used by plastic surgeons for liposuction and care following surgery. Liposuction may be performed under local or general anesthesia. **Tumescent liposuction technique** involves the infiltration of fluid containing dilute local anesthetic and epinephrine into areas of fatty deposits. This technique can reduce discomfort at the time of surgery, as well as reduce post-operative bruising.

Support garments and dressings are worn to control swelling and promote healing. Your surgeon may recommend that you make arrangements to donate a unit of your own blood that would be used if a blood transfusion were necessary after surgery.

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ALTERNATIVE TREATMENT

Alternative forms of management consist of not treating the areas of fatty deposits. Diet and exercise regimens may be of benefit in the overall reduction of excess body fat.

Direct removal of excess skin and fatty tissue may be necessary in addition to liposuction in some patients. Risks and potential complications are associated with alternative forms of treatment that involve surgery.

RISKS OF LIPOSUCTION SURGERY

Every surgical procedure involves a certain amount of risk, and it is important that you understand the risks involved with liposuction. 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 these complications, you should discuss each of them with Dr. Baroody to make sure you understand the risks, potential complications, and consequences of liposuction.

Patient Selection - Individuals with poor skin tone, medical problems, obesity, or unrealistic expectations may not be candidates for liposuction.

Bleeding - It is possible, though unusual, to have a bleeding episode during or after surgery. Should post-operative bleeding occur, it may require emergency treatment to drain accumulated blood or require a blood transfusion. Do not take any aspirin or anti-inflammatory medications for seven 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 - An infection is quite unusual after this type of surgery. Should an infection occur, treatment including antibiotics or additional surgery may be necessary. In extremely rare instances, life-threatening infections, including toxic shock syndrome have been noted after liposuction surgery.

Skin Scarring - Although good wound healing after a surgical procedure is expected, in rare cases, abnormal scars may occur within the skin and deeper tissues. Scars may be unattractive and of a different color than surrounding skin. Additional treatments, including surgery, may be needed to treat abnormal scarring.

Change in Skin Sensation - A temporary decrease in skin sensation after liposuction may occur. This usually resolves over a period of time. Diminished (or complete loss of skin sensation) infrequently occurs and may not totally resolve.

Skin Discoloration/Swelling - Skin discoloration and swelling normally occurs following liposuction. In rare situations, swelling and skin discoloration may persist for long periods of time. Permanent skin discoloration is rare.

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Skin Contour Irregularities - Contour irregularities and depressions in the skin may occur after liposuction. Visible and palpable wrinkling of skin can occur. Additional treatments including surgery may be necessary to treat skin contour irregularities following liposuction.

Asymmetry - It may not be possible to achieve symmetrical body appearance from liposuction surgery. Factors such as skin tone, bony prominence, and muscle tone may contribute to normal asymmetry in body features.

Seroma - Fluid accumulations infrequently occur in areas where liposuction has been performed. Additional treatments or surgery to drain accumulations of fluid may be necessary.

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 liposuction.

Tumescent Liposuction - 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.

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

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

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 due to drugs used during surgery and prescription medicines. Allergic reactions may require additional treatment.

Surgical Shock - In rare circumstances, liposuction can cause severe trauma, particularly when multiple or extensive areas are suctioned at one time. Although serious complications are infrequent, infections or excessive fluid loss can lead to severe illness and even death. Should surgical shock occur after liposuction, hospitalization and additional treatment would be necessary. Individuals undergoing liposuction procedures where large volumes of fat are removed are at greater risk of complications. Patients contemplating large volume liposuction, greater than 5000 cc's, may be advised to have post operative monitoring and aftercare that involves overnight hospitalization.

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Pulmonary Complications - Fat embolism syndrome occurs when fat droplets are trapped in the lungs. This is a very rare and possibly fatal complication of suction-assisted lipectomy. Pulmonary complications may occur secondarily to both blood clots (pulmonary emboli) and 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.

Skin Loss - Skin loss is very rare after liposuction. Additional treatments including surgery may be necessary.

Chronic Pain - Chronic pain and discomfort following liposuction is very rare.

Ultrasound-Assisted Lipectomy - Risks associated with the use of this technique include the above mentioned risks and the following specific risks:

Burns - Ultrasonic energy may produce burns and tissue damage either at the location where the cannula is inserted into the skin or in other areas if the cannula touches the undersurface of the skin for prolonged periods of time. If burns occur, additional treatment and surgery may be necessary.

Cannula Fragmentation - Ultrasonic energy produced within the cannula may cause disintegration (fragmentation) of the surgical instrument. The occurrence and effect of this is unpredictable. Should this occur, additional treatment, including surgery, may be necessary.

Unknown Risks - The long term effect on tissue and organs to exposure to short-duration, high-intensity ultrasonic energy is unknown. There is the possibility that additional risk factors of ultrasound-assisted lipectomy may be discovered.

HEALTH INSURANCE

Most health insurance companies exclude coverage for cosmetic surgical operations such as liposuction or any complications that might occur from surgery. Please carefully review your health insurance subscriber-information pamphlet.

ADDITIONAL SURGERY NECESSARY

There are many variable conditions in addition to risk and potential surgical complications that may influence the long term result from liposuction. Even though risks and complications occur infrequently, the risks cited are particularly associated with liposuction. Other complications and risks can occur but are even more uncommon. Should complications occur, additional surgery or other treatments may be necessary. 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.

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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. Dr. Baroody 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.

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.

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CONSENT FOR SURGERY, PROCEDURE, or TREATMENT

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

LIPOSUCTION

I have received the following information sheet:

INFORMED CONSENT; LIPOSUCTION SURGERY
(Suction-Assisted Lipectomy Surgery; Ultrasound-Assisted Lipectomy 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 of any tissue, medical devices or body parts which may be removed.
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 _____

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Liposuction

Before Surgery Instructions:

Medications

- No Aspirin or Anti-inflammatory medications (See next page) at least 3 weeks before surgery. Tylenol may be taken if necessary.
- Notify Dr. Baroody of all medications you are taking including over-the-counter and herbal supplements
- Bring your daily medication with you on the day of surgery

Diet

- Nothing to eat or drink after midnight, the night prior to your surgery

Tobacco

- Absolutely no tobacco (including “the patch”, nicotine gum, nicotine nasal spray) or being around anyone who is smoking for 2 months prior to surgery
- If you smoke prior to surgery, the procedure will be CANCELLED

Attire

- Do not wear any makeup, contact lenses, nail polish, or jewelry to surgery
- Leave jewelry and other personal valuables at home

Activity

- Plan to have someone stay with you for the first 24 hours after your surgery
- Plan for a driver after surgery. If you do not have someone to drive you home your surgery will be CANCELLED

Notify the office if you have any of the following symptoms within 2 weeks of your surgery:
FEVER, COUGH, COLD, NAUSEA, VOMITING, DIARRHEA, OR RASH

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Before you stop taking any prescribed drugs, you must receive clearance from the prescribing physician. Please notify our office immediately if you do not receive clearance to stop taking your prescribed medications.

The following drugs could cause life-threatening problems with surgery. If you are on these medications you must discuss these with your doctor. Patients who take these drugs may require laboratory tests and a consultation with their physician to determine when they may safely undergo a surgical procedure.

- | | |
|---|----------------|
| ❖ Coumadin | ❖ Methotrexate |
| ❖ Elmiron-IC | ❖ Plavix |
| ❖ Fragmin, Lovanox and other low Molecular Weight Heparin Drugs | ❖ Persantin |

Patients on Aspirin, Coumadin, or Aggrenox regimen should consult their ordering physician for instructions.

All herbal or dietary supplements should be stopped 2 weeks prior to surgery. **This includes vitamins, and anti-oxidant supplements, as well as consumption of any form of Green Tea.**

FAILURE TO ADHERE TO THE ABOVE MAY RESULT IN THE CANCELLATION OF YOUR SURGERY.

There are several categories of additional medications that must not be taken in the 2 weeks prior to surgery. A listing of these drugs is attached. You are not to take any of these products listed. Tylenol is fine.

Authorization

I have disclosed all of the medications, supplements and herbal remedies I take on a regular or incidental basis to Dr. Barood. I understand that I am required to refrain from taking any of the above and below listed medications in the days prior to surgery. Should I take any of the medications, supplements or herbal remedies I am instructed to avoid, it is my obligation to notify my physician immediately. I fully understand that my surgery may have to be rescheduled or postponed in the event that I have not complied with these medication restrictions listed.

I also understand that it is my responsibility to obtain clearance from the prescribing physician before I stop taking any of my regularly prescribed medications.

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Medications, Vitamins, and Supplements to Avoid

Aspirin and Aspirin containing medications include, but are not limited to the following:

Alka Seltzer	Darvon Compound	Palbalate
Alka Seltzer Plus	Darvon Compound 65	Palbalate SF
Anacin	Don's Pills	PAC
Apac Tablets	Dristan	Pamprin
APC Tablets	Easprin	Percodan
Arthritis pain reliever	Ecotrin	Percodan Demi
Arthropan	Emprin Compound	Propox Compound
Aspirin Tablets USP	Emprin Compound #3	Robixisal
ASA	Equagesic	Salflex
ASA plus codeine	Excedrin	Sine Off
Acriptin	Fiorinal	Sodium Salicylate
Asperbuf	Fiorinal #3	Soma Compound
Aspergum	4 Way Cold Tab	Saint Joseph
Axotoal	Liquiprin	Supac
Azdpme	Lortab ASA	Synalgos
BAC	Magnaprin	Synalgos DC
Bayer Aspirin	Measurin	Salwin Compound
BC Powder	Mediprine	Trilistate
Bufferin	Midol	Trigesic
Butalbital Compound	Momentum	Ursinus Tabs
Cama inlay-tabs	Mono-gesic	Vanquish
Carisprodal Compound	Norgesic	Zorprin
Congesprin	Norgesic Forte	Plavix
Cope	Norwich	Coumadin
Coricidin-D	Orphengesic	
Damason	Orphengesic Forte	

Anti-Inflammatory and Anti-Inflammatory containing medications include, but are not limited to the following:

Aches n Pain	Haltran	Naproxen
Advil	Ibuprofen	Nuprin
Aleve	Ibu-tab	Orudis
Anaprox	Ifen	Ovuvail
Ansaid	Indocin	Pediaprophen
Butazoladin	Indomethocin	Phenylbutazone
Cataflam	Meclomen	Panstel
Clinoril	Medipren	Rufen
Co-Advil	Motrin	Tolectin
Daypro	Motrin IB	Toradol
Dolobid	Nalfon	Trendar
Fledene	Naproxyn	Voltaren

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Additional medications to avoid include but are not limited to the following:

- | | | |
|---------------|-------------------------|-----------------|
| Alloe | Kava-Kava | Mysteclin F |
| Barberry | Licorice | Nicobid |
| Bilberry | Parsley Seed | Oraflex |
| Cardomon | Saffron | Pamelor |
| Don Quai | Tansy | Parnate |
| Chlortrimeton | Tumeric | Phendimetrazine |
| Clinoril | Valerian | Phentermine |
| Elavil | Vitamin C 250 gms / day | Ru-Tuss |
| Echinacea | Vitamin A | St. John's Wart |
| Fatty Acids | Vitamin E | Surmontil |
| Fever Feu | Willow Bark | Tagamet |
| Fish Oil | Endep | Tenuate Dospan |
| Garlic | Etiafon | Tetracycline |
| Ginkgo | Flagyl | Triavil |
| Ginger | Flexoril | Vibramycin |
| Ginseng | Imitrex | Yohimbe |
| Hawthorne | Lioresal | Zomax |

I have read and understand all of the above instructions. I understand that following these instructions is solely my responsibility. I understand that it is also my responsibility to ask Dr. Baroodly and his staff any questions I have related to these instructions or about my procedure, health, and healing.

Patient or Person Authorized
to Sign for the Patient _____ Date: _____

Witness Signature _____ Date: _____

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After Surgery Instructions:

Medications

- Do not take medications on an empty stomach
- Use the prescribed Tylenol with Codeine or Extra-strength Tylenol for pain
- No Aspirin or any medication containing Aspirin

Diet

- Begin with sips of liquids and gradually progress to a regular diet as tolerated
- Drink 8-10 glasses of water, juice, or Gatorade per day after surgery

Tobacco

- No smoking and being around anyone who is smoking for 2 months

Attire/Dressings

- Wear the compression garment for 4 weeks after surgery
 - 24 hours/day for the 1st 2 weeks
 - Just during the day for the 2nd 2 weeks
- Expect the garment to be wet in the first 24 hours
- When the garment becomes soiled; remove, wash, dry, and replace
- No warm or hot compresses to the skin

Skin Care

- Avoid direct sun exposure to incision site for 1 year
- No tanning beds for at least 1 year

Activity/Work

- Rest at home for 24 hours
- Start walking and caring for yourself the day of surgery
- No heavy lifting (greater than 10 pounds) and no strenuous exercise (aerobics, stretching, vacuuming, laundry, etc.) are permitted for 3 weeks
- Shower the morning after your surgery; If the band-aids fall off, replace
- Gently wash the operative area with soap and water the day after surgery
- Return to work in 5-7 days depending on post-operative physician examination
- Drive in 2-3 days provided you are not taking prescribed pain medication

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What to Expect

You will have swelling and bruising post-operatively. The degree varies with each individual and usually resolves within 4-6 weeks.

It is not uncommon to feel emotional after any cosmetic surgery. This is usually related to the immediate discomfort, anxiety over the appearance of swelling and bruising, and limitation of activity and socializing. These feelings will disappear as your appearance improves and you return to your usual daily activities.

Notify the office immediately if you develop: FEVER OVER 100°F, SEVERE PAIN NOT RELIEVED WITH PAIN MEDICATION AND REST, INCREASED SWELLING OR BLEEDING, NAUSEA OR VOMITING. NUMBNESS AROUND THE LIPS, RINGING IN THE EARS, METALLIC TASTE, OR MUSCLE TWITCHING.

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