

FEEL BEAUTIFUL

PLASTIC SURGERY

INFORMED CONSENT FOR ABDOMINOPLASTY (TUMMY TUCK) SURGERY

INSTRUCTIONS

Please become fully informed about abdominoplasty (tummy tuck) surgery before proceeding with the operation. It is Dr. Laverson's responsibility to provide this information for you. It is your responsibility to become familiar with this information and to consider it when deciding whether or not to proceed. Read each paragraph completely. If you have questions or there are words you don't know, ask Dr. Laverson. Surgery is not an exact science. Because it is impossible to predict your outcome precisely in advance of the procedure, you should understand risks and possible complications of abdominoplasty. Your signature below confirms your understanding and your request for abdominoplasty (tummy tuck) surgery.

INTRODUCTION

Abdominoplasty is a surgical operation to create a more youthful, attractive, and thin contour of your abdomen, between ribs above and pelvis below in the front of your body. This is accomplished by removing excess skin and fat from the abdomen, by tightening connective tissue of the abdominal wall, and by sculpting what remains. Abdominoplasty is not a surgical treatment for obesity. If you are significantly overweight, it is best to postpone all forms of body contouring surgery until you can lose extra fat and maintain a stable healthy weight for a period of time.

There are many techniques for abdominoplasty. Abdominoplasty may be performed as a stand-alone body contouring treatment or may be combined with other procedures such as suction-assisted lipectomy, breast augmentation or lift, thigh-plasty, etc.

ALTERNATIVES

Alternative treatments include non-surgical measures (diet and exercise), suction assisted lipectomy (liposuction), mini-abdominoplasty, and other custom designed procedures (e.g. reverse abdominoplasty, modified abdominoplasty, endoscopic abdominoplasty) to change your shape and address individual features of your appearance. Alternative treatments have their own risk profile.

RISKS and LIMITATIONS of ABDOMINOPLASTY SURGERY

Every surgical procedure risks problems, complications, and/or unanticipated adverse events. Your decision for this (or any) operation should be based on a comparison of risk to expected benefit. There are also limitations of what abdominoplasty can achieve even when the operation and recovery proceed well. Although most patients do not experience complications, please understand the following possible problems most often associated with abdominoplasty. Complications are often unpredictable. After reading about these risks, please address any and all questions to Dr. Laverson.

Bleeding- It is possible, though unusual, to experience a bleeding episode during or after surgery. Should post-operative bleeding occur, it may require an emergency treatment to drain the accumulated blood or blood transfusion. Intra-operative blood transfusions may be required. **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 bleeding. Hematoma (an accumulation of blood in the tissues) can occur at any time following surgery. If blood transfusions are needed to treat blood loss, there is a risk of blood related infections such as hepatitis and HIV (AIDS). Heparin medications that are used to prevent blood clots in veins can produce bleeding and decreased blood platelets.

Infection - Infection is unusual after surgery. Should an infection occur, treatment including antibiotics, hospitalization, 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- You can expect diminution or complete loss of skin sensation in areas that have had surgery. Diminished (or complete loss of skin sensation) may not totally resolve after an abdominoplasty. Numbness of the lower abdomen may be permanent.

Skin Contour Irregularities- Contour and shape irregularities and depressions may occur after abdominoplasty. Visible and palpable wrinkling of skin can occur. Residual skin irregularities at the ends of the incisions or "dog ears" are always a possibility as is skin pleating when there is excessive redundant skin. This may improve with time, or it may not. Surgery to smooth the irregularities may be necessary at additional expense. Sometimes, the irregularities cannot be surgically corrected.

Major Wound Separation- Wounds may separate after surgery. Should this occur, additional treatment including surgery may be necessary.

Skin Discoloration / Swelling- Bruising and swelling normally occur following abdominoplasty. The skin in or near the surgical site can appear either lighter or darker than surrounding skin. Although uncommon, swelling and skin discoloration may persist for long periods of time and, in rare situations, may be permanent.

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 persist.

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 removal.

Damage to Deeper Structures- There is a possibility of injury to deeper structures including nerves, blood vessels, muscles, and internal organs during any surgical procedure. Injury to deeper structures may be temporary or permanent.

Fat Necrosis- Fat volume beneath the skin may die. This may cause areas of firmness or lumps beneath 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.

Scarring- All surgery heals by scarring. Some scars are more visible than others. Although good wound healing after a surgical procedure is expected, abnormal scars may develop on the skin and within deeper tissues. Scars may be wide, thick, raised, discolored, unattractive, and asymmetric between right and left sides of the body. Scars may be difficult to conceal beneath the clothing you prefer. Scar appearance may vary within the same scar, exhibit texture variations or "bunching" due to the amount of excess skin. There is a possibility of visible marks in the skin from sutures. Scars may be objectionable enough to require surgical revision or treatment to improve their location or appearance, which may or may not be possible.

Anesthesia- Both local and general anesthesia involve risk. Complications, injury, and even death, although extremely rare and unlikely, are possible during or after anesthesia and/or sedation.

Umbilicus (Belly Button) - Malposition, scarring, unacceptable appearance, and/or loss of the umbilicus (navel) may occur. Further surgery may be required to reconstruct the umbilicus (belly button).

Pubic Distortion- It is possible, though unusual, for women to develop distortion of their labia and pubic area. Should this occur, additional treatment including surgery may be necessary.

Asymmetry- Symmetrical body appearance may not result from abdominoplasty. Factors such as skin tone, fat deposits, skeletal prominence, and muscle tone may contribute to normal asymmetry in body features. Additional surgery may be necessary to attempt to improve asymmetry.

Allergic Reactions- After plastic surgery, allergies to tape, suture material and medical glues, blood products, topical preparations or injected agents have been reported. Serious systemic reactions including shock (anaphylaxis) may occur to drugs used during surgery and prescription medications. Allergic reactions may require additional treatment.

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 or tissue 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.**

Seroma- Fluid may accumulate between the skin and the abdominal wall. If so, additional procedures for fluid drainage may be recommended.

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.

Surgical Wetting Solutions- Large volumes of fluid containing dilute local anesthetic drugs and epinephrine that is injected into fat 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 legs can (rarely) occur following abdominoplasty.

Pain- You will experience pain after your surgery. Pain of varying intensity and duration may occur and persist after abdominoplasty. Chronic pain may occur infrequently from nerves becoming trapped in scar tissue after abdominoplasty. Further surgery may be required for treatment which may or may not be successful. Medication may be required for long periods of time to control pain.

Disappointing Result- Although good results are expected and usually achieved, this cannot be guaranteed in advance. Plastic surgery comes with no warranty. Each person and every surgery is different. You may be unhappy with the results of your tummy tuck (abdominoplasty). You may be dissatisfied with one or multiple aspects of the appearance of your abdomen after tummy tuck. Possible problems include, but are not limited to, asymmetry between right and left sides, residual excess or loose skin anywhere on the abdomen, abnormal surface contour, unsatisfactory or highly visible surgical scar location, unacceptable visible deformities, bunching and rippling in the skin near the suture lines or at the ends of the incisions (dog ears), poor healing, wound disruption, and loss of sensation. It may not be possible to correct or improve the effects of surgical scars. In some situations, it may not be possible to achieve optimal results with a single surgical procedure. Additional surgery may be recommended and/or required to improve results. Your dissatisfaction may be positional (i.e. abdominal surface looks good when standing, but not when seated or flexed forward).

Because the body and human tissues are dynamic and unpredictable, achievement of a particular aesthetic result may require more than one intervention, i.e. minor and occasionally major adjustments to the outcome after a single procedure. Depending on your situation and your expectations, serial (two or more) procedures may be necessary. In some cases, achieving your desired or visualized result may not be possible.

Deep Venous Thrombosis (Blood Clots in the Veins), Heart and Lung Complications- Surgery, especially longer procedures, may be associated with the formation or spread of blood clots in your veins. Pulmonary (lung) complications may occur from blood clots (pulmonary emboli), fat deposits (fat emboli) or partial collapse of the lungs after general anesthesia. Pulmonary and fat emboli can be life-threatening or fatal. Air travel, inactivity and other conditions may increase the chance of blood clots traveling to the lungs (embolizing) causing a catastrophe resulting in death. It is important to discuss with Dr. Laverson any past history of blood clots, swollen legs or the use of estrogen or birth control pills that may contribute to this condition. Cardiac (heart) complications are a risk with any surgery and anesthesia, even in patients without symptoms. Should any of these complications occur, you may require hospitalization and additional treatment. If you experience shortness of breath, chest pains, or unusual heart beats, seek medical attention immediately.

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

Body-Piercing Procedures- Body piercing sites can become infected after surgery. Removal of jewelry is recommended before your procedure. These items may be replaced afterward, unless the opening is in the area of surgery and has been closed. Advise Dr. Laverson and/or the pre-surgical nurse if you are unable to remove jewelry. Skin at the site, the jewelry, and the opening must be protected during your operation.

Female Patient Information- Inform Dr. Laverson 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.

Physical Activity After Surgery- Surgery involves cauterization and ligation of blood vessels. Physical activity following surgery may open these vessels causing them to bleed. Activity that increases your pulse and/or heart rate may cause additional pain, bruising, swelling, wound separation, and the need for return to surgery. Delay sexual and strenuous physical activity for at least four weeks after the procedure, and then proceed with gradual increases in activity only as you are able to do so without significant pain. Pain is your body's signal to rest.

Medications- Adverse reactions may result from over-the-counter, herbal, and/or prescription medications. Check with your physician about drug interactions that may exist with medications that you are already taking. If you have an adverse reaction, stop the drugs immediately and call Dr. Laverson for further instructions. If the reaction is severe, go immediately to the nearest emergency room. Pain medications you use after surgery affect your thought process and coordination. Do not drive or operate complex equipment or make any important decisions or drink any alcohol while taking these medications. Take prescribed medication only as directed, and call Dr. Laverson if the medication is not relieving your pain or if you are not tolerating the medication well.

Mental Health Disorders and Elective Surgery- All patients considering cosmetic surgery should have realistic expectations that focus on improvement rather than perfection. Complications or unsatisfactory results are sometimes unavoidable, may require additional surgery, and are often stressful. Before your procedure, openly discuss with Dr. Laverson any history that you have of 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.

Smoking, Vaping, Juuling, E-cigarettes, Second-Hand Smoke, and other Nicotine Products (Patch, Gum, Nasal Spray)- Patients who are currently smoking, using tobacco products, or nicotine products (vaping, juuling, e-cigarettes, patch, gum, nasal spray, etc.) have increased risk of complications such as dead, foul smelling skin, delayed healing, and additional scarring. Individuals exposed to second-hand smoke also have elevated risk for these complications, attributable to nicotine. Smoking has a negative effect on anesthesia and recovery from anesthesia, with coughing and possibly increased bleeding. Individuals who are not exposed to tobacco smoke or nicotine-containing products have less risk for these complications.

Completely stop nicotine consumption for at least 4 weeks (preferably longer) before surgery and until Dr. Laverson states it is safe to resume, if desired.

ADDITIONAL SURGERY NECESSARY (RE-OPERATIONS)

Many conditions influence the outcome after surgery. If complications occur, additional surgery or other treatments may be necessary. Secondary surgery may be necessary to improve the result. Even though complications occur infrequently, those mentioned above are particularly associated with abdominoplasty. Other complications can occur but are even less common. The practice of medicine and surgery is not an exact science. Although good results are expected, your satisfaction cannot be guaranteed. In some situations, it may not be possible to achieve optimal results even after multiple surgical procedures.

PATIENT COMPLIANCE

Follow all physician instructions carefully. This is essential for a good outcome. Healing is a gradual process (weeks to months). Surgical incisions should not be subjected to excessive force, swelling, abrasion, or motion during the time of healing. Personal and vocational activity must be restricted. Protective dressings and drains should not be removed unless instructed by Dr. Laverson. Successful recovery depends on how the surgery is performed, but also on your care and activity during the days and weeks after the procedure when your body is healing and your tissues are repairing. Physical activity that increases your pulse or heart rate may cause bruising, swelling, fluid accumulation, and the need to return to surgery. It is wise to refrain from sexual and strenuous physical activities after surgery until Dr. Laverson states it is safe (Usually several weeks). Participate in follow-up care, return for aftercare, and promote your recovery by resting and allowing your body to heal after surgery.

FINANCIAL RESPONSIBILITIES

The cost of your tummy tuck (abdominoplasty) combines individual charges for services provided. The total includes fees charged by Dr. Laverson, by your anesthesiologist, and for post-operative garment(s), for the outpatient surgery center staff, equipment, medications, supplies, and infrastructure, for federal, state, and local taxes, for licensing and accreditation fees, etc. The total cost of your procedure does not include future costs for additional procedures that you elect to have or require in order to revise, optimize, or complete your outcome. Additional expenses may be incurred if complications develop from the surgery. Secondary surgery or revision surgery will also be your responsibility. **In signing the consent for this surgery/procedure, you acknowledge that you have been informed about the most common associated risks and adverse consequences. When you sign, you are also accepting responsibility for the clinical decisions that were made along with the financial costs of all future treatments.**

HEALTH INSURANCE

Health insurance companies exclude coverage for cosmetic surgical operations such as abdominoplasty. Occasionally, medical complications that result from surgery may be covered. Please review your health insurance contract or ask your insurance company for a detailed explanation of their policies. **Insurance plans exclude coverage for secondary or revision surgery.**

DISCLAIMER

This informed consent document communicates information about surgery and discloses risks of and alternatives to treatment, including no surgery at all. This risk disclosure attempts to meet the needs of most patients in most circumstances. However, this document should not be considered all-inclusive in defining other methods of care and of all risks. Dr. Laverson may provide you with additional or different information that is based on all the facts in your particular case and the current 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 facts involved in an individual case and are subject to change as scientific knowledge and technology advance and as treatments evolve.

Please understand the above information before signing the consent on the following page. Ask Dr. Laverson or office staff your questions.

CONSENT FOR ABDOMINOPLASTY / TUMMY TUCK

1. Dr. Steve Laverson and assistant(s) are requested to perform **ABDOMINOPLASTY (TUMMY TUCK)** surgery on me. I have received, reviewed, and understand all of the above information.
2. Rarely, during the course of plastic surgery, unforeseen conditions necessitate changes in the surgical plan. Dr. Laverson is authorized to perform such procedures that are in the exercise of his best professional judgment necessary, desirable, and in my own best interest. The authority granted under this paragraph shall include all conditions that require treatment and are not known at the commencement of surgery.
3. I consent to the administration of such anesthetics considered necessary or advisable. All forms of anesthesia involve risk and the possibility of complications, injury, and sometimes death.
4. Nobody has guaranteed or indicated to me that I will be satisfied with the results of this procedure.
5. I consent to be photographed before and after 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. I consent to the disposal of any tissue, medical devices or body parts that may be removed.
7. Although the possibility is extremely unlikely, I consent to the utilization of blood products should they be deemed necessary by Dr. Laverson, and I am aware that there are potential significant risks to my health with their utilization.
8. I understand that surgeons' fees are separate from anesthesia and surgery center charges. The fees are agreeable to me. If a secondary procedure is necessary, further expense may be incurred.
9. My final result doesn't become apparent until at least six months following my procedure. The most important office visits happen at that future time. Committing to abdominoplasty also commits me to follow up for 6 -12 months after the procedure.
10. I realize that not having the operation is an option.
11. IT HAS BEEN EXPLAINED TO ME IN A WAY THAT I UNDERSTAND:
 - a. ABDOMINOPLASTY (TUMMY TUCK) SURGERY
 - b. ALTERNATIVE PROCEDURES OR METHODS OF TREATMENT
 - c. RISKS AND MOST LIKELY COMPLICATIONS OF ABDOMINOPLASTY

I CONSENT TO ABDOMINOPLASTY (TUMMY TUCK) SURGERY AND THE ABOVE LISTED ITEMS (1 – 11). MY QUESTIONS HAVE BEEN ANSWERED, AND I'M SATISFIED WITH THE EXPLANATION.

Signature of Patient or Person Authorized to Sign for Patient

Printed Name

Date _____

Witness _____