

INFORMED-CONSENT – AUGMENTATION MAMMAPLASTY

INSTRUCTIONS – This is an informed-consent document that has been prepared to help your plastic surgeon inform you about augmentation mammaplasty surgery, its risks, and 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.

GENERAL INFORMATION -

Indications:

Augmentation mammaplasty is a surgical operation performed to enlarge the breasts for a number of reasons:

- To enhance the body contour of those, who for personal reasons feels that their breast size is too small.
- To correct a loss in breast volume.
- To balance the breast size, when there exists a significant difference between the sizes of the breasts.
- As a reconstructive technique for various conditions.
- Replacement of breast implants for medical or cosmetic reasons.

The shape and size of the breasts prior to surgery will influence both the recommended treatment and the final results. If the breast are not the same size or shape before surgery, it's unlikely that they will be completely symmetrical afterword.

Silicone gel-filled implants are available in the United States for purely cosmetic breast augmentations. Breast implants that contain silicone gel had been restricted by the United States Food and Drug Administration (FDA) since February pf 1992 to women who are participating in approved study programs. Now silicone and Saline-filled breasts implants are widely available for both breast augmentation and reconstruction.

Breast enlargement is accomplished by inserting a breast implant either behind the breast tissue or under the chest muscles. Incisions are made to keep scars as inconspicuous as possible, usually under the breast, around the areola, or in the armpit. The method of inserting and positioning breast implants will depend on your preference, your body anatomy and your surgeon's recommendation.

Patients undergoing an augmentation mammaplasty surgery must consider the possibility of future surgical revisions. Breast implants cannot be expected to last forever.

PATIENT INITIALS: _____

<u>ALTERNATIVE TREATMENT</u> – Augmentation mammaplasty is an elective surgical procedure. Alternative treatment would consist of not undergoing the surgical procedure, the use of breast prosthesis or padding, or the transfer of other body tissue to enlarge the breast.

RISKS OF MASTOPEXY SURGERY- Every surgical procedure involves a certain amount of risk, and it is important that you understand the risks involved with augmentation mammaplasy. An individual's choice to undergo a surgical procedure is based on the comparison of the risk to potential benefit. While the majority of women do not experience these complications, you should discuss each of them with your plastic surgeon to make sure you understand the risks, potential complications and consequences of n augmentation mammaplasy.

BLEEDING – It is possible, though unusual, to experience a bleeding episode during or after surgery. Should postoperative bleeding occur, it may require emergency treatment to drain accumulated blood (hematoma). DO NOT take any ibuprofen, aspirin or anti-inflammatory medications for ten days or more before your surgery, as this may increase the risk of bleeding.

INFECTION – Infection is unusual after this type of surgery. It may appear in the immediate post-operative period or at any time following the insertion of a breast implant. Subacute or chronic infections may be difficult to diagnose. Should an infection occur, treatment including antibiotics, possible removal of the implant, or additional surgery may be necessary. Infections with the presence of a breast are harder to treat than infections in normal body tissues. If an infection does not respond to antibiotics, the breast implant may have to be removed. After the infection is treated, the new breast implant can usually be reinserted. It is extremely rare that an infection would occur around an implant from a bacterial infection elsewhere in the body, however, prophylactic antibodies may be considered for subsequent dental or other surgical procedures.

CAPSULAR CONTRACTURE – Scar tissue, which forms internally around the breast implant, can tighten and make the breast round, firm and possibly painful. Excessive firmness of the breasts can occur soon after the surgery or years later. Although the occurrence of symptomatic capsular contracture is not predictable, it generally occurs in less than 20 percent of patients. The incidence of symptomatic capsular contracture can be expected to increase over time. Capsular contracture may occur on once side, both sides, or not at all. Treatment for capsular contracture may require surgery, implant replacement, or implant removal.

CHANGE IN NIPPLE OF SKIN SENSATION – Some change in nipple sensation is not unusual right after surgery. After several months, most patients have normal sensation. Partial or permanent loss of nipple and skin sensation may occur.

SKIN SCARRING – Excessive scarring in uncommon. In rare cases, abnormal scars may result. Scars may be unattractive or different color than surrounding skin. Additional surgery may be needed to treat abnormal scarring after surgery.

IMPLANTS – Breast implants, similar to other medical devises, can fail. Implants can break or leak. When a saline-filled implant deflates, its salt water filling will be absorbed by the body. Rupture can occur as a result of an injury, from no apparent cause, or during mammography. It is possible to damage an implant at the time of surgery. Damage or broken implants cannot be repaired. Ruptured or deflated implants require replacement or removal. Breast implants cannot be expected to last forever.

DEGRADATION OF BREAST IMPLANTS – It is possible that small pieces of the implant material may separate from the outer surface of breast implants. This has unknown significance.

PATIENT INITIALS: _____