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Patient Name:
«Person_First_Middle_Last»

CONSENT FOR BRACHIOPLASTY SURGERY

Brachioplasty is a surgical procedure that is used to help remove the excess skin and fatty tissue from the axilla and upper arm. Brachioplasty 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 reached a stable weight.

There are a variety of different techniques used by plastic surgeons for brachioplasty. Brachioplasty can be combined with other forms of body-contouring surgery, including suction-assisted lipectomy, or other elective surgeries.

Brachioplasty is an elective surgical operation. Alternative forms of management consist of not treating the areas of loose skin and fatty deposits. Liposuction surgery may be a surgical alternative to brachioplasty if there is good skin tone and localized fatty deposits in an individual of normal weight. Diet and exercise regimens may be of benefit in the overall reduction of excess body fat. Risks and potential complications are also associated with alternative surgical forms of treatment.

RISKS OF BRACHIOPLASTY SURGERY

Every surgical procedure involves a certain amount of risk and it is important that you understand these risks and the possible complications associated with them. In addition, every procedure has limitations. 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 your plastic surgeon to make sure you completely understand all possible consequences of brachioplasty.

- Bleeding-** It is possible, though unusual, to experience a bleeding episode during or after surgery. Intraoperative blood transfusions may be required. Should post-operative bleeding occur, it may require an emergency treatment to drain the accumulated blood or blood transfusion. Do not take any aspirin or anti-inflammatory medications for two weeks before surgery, as this may increase the risk of bleeding. Non-prescription "herbs" and dietary supplements can increase the risk of surgical bleeding. A hematoma can occur at any time following injury. 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, additional treatment including antibiotics, hospitalization, or additional surgery may be necessary.
- Change in Sensation-** It is common to experience diminished (or loss) of skin sensation in areas that have had surgery. It is rare to experience permanent changes in sensation in the hands and forearms after brachioplasty. Diminished (or complete loss of skin sensation) may not totally resolve after brachioplasty.
- Skin Contour Irregularities-** Contour irregularities and depressions may occur after brachioplasty. 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 can be surgically corrected.
- Skin Discoloration/Swelling-** Bruising and swelling normally occurs following brachioplasty. The skin in or near the surgical site can appear either lighter or darker than surrounding skin. Although uncommon, swelling (including the forearms and hands) and skin discoloration may persist for long periods of time and, in rare situations, may be permanent.

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- **Skin Sensitivity-** Itching, tenderness, or exaggerated responses to hot or cold temperatures may occur after surgery. Usually this resolve during healing, but in rare situations it may be chronic.
- **Sensation of Arm Tightness-** After lifting the arm skin, there can be a sensation of the arm skin being tight. Usually this feeling subsides over time. Additional surgery may be required to correct this problem.
- **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.
- **Fat Necrosis-** 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. Most fat necrosis resolves on it's own with time, this can take several months.
- **Damage to Deeper Structures-** There is the potential for injury to deeper structures including, nerves, blood vessels, muscles during any surgical procedure. The potential for this to occur varies according to the type of procedure being performed. Injury to deeper structures may be temporary or permanent.
- **Scarring-** All surgery leaves scars, some more visible than others. Although good wound healing after a surgical procedure is expected, abnormal scars may occur within the skin and deeper tissues. Scars may be unattractive and of different color than surrounding skin. Scar appearance may also vary within the same scar, exhibit contour variations and "bunching" due to the amount of excess skin. Scars may be asymmetrical (appear different between 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.
- **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.
- **Asymmetry-** Symmetrical body appearance may not result from brachioplasty. 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 body before any surgery is performed. Additional surgery may be necessary to attempt to improve asymmetry.
- **Delayed Healing-** Wound disruption or delayed wound healing is possible. Some areas of the arm 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 and 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.
- **Seroma-** Fluid accumulations infrequently occur between the skin and the underlying tissues. Should this problem occur, it might require additional procedures for drainage of the fluid.
- **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.
- **Pain-** You will experience pain after your surgery. Pain of varying intensity and duration may occur and persist after brachioplasty surgery. Chronic pain may occur very infrequently from nerves becoming trapped in scar tissue after a brachioplasty.
- **Unsatisfactory Result-** Although good results are expected, there is no guarantee or warranty expressed or implied, on the results that may be obtained. You may be disappointed with the results of brachioplasty surgery. This would include risks such as asymmetry, unsatisfactory or highly visible surgical scar location,

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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. Additional surgery may be required to improve results.

- **Deep Venous Thrombosis, Cardiac and Pulmonary Complications-** Surgery, especially longer procedures, may be associated with the formation of, or increase in, blood clots in the venous system. 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 and fat emboli can be life-threatening or fatal in some circumstances. Air travel, 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 blood clots, swollen legs or the use of high estrogen birth control pills 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 pains, or unusual heart beats, seek medical attention immediately. Should any of these complications occur, you may require hospitalization and additional treatment.

ADDITIONAL ADVISORIES

COVID-19 Infection:

If you were to become symptomatic with a COVID-19 infection during your recovery, it could increase your morbidity/mortality and complication rate. There are still many unknowns, and recommendations about COVID-19 do change rapidly. Please follow the updated local health recommendations regarding COVID-19 to protect yourselves and others on: www.denvergov.org/Government/COVID-19-Information.

By signing this consent, I understand I am opting for an elective treatment/procedure/surgery that is not urgent and may not be medically necessary. I understand that possible exposure to COVID-19 before/during/after my treatment/procedure/surgery may result in: a positive COVID-19 diagnosis, extended quarantine/self-isolation, additional tests, emergency room visits or hospitalization that may require medical therapy, Intensive Care treatment, possible need for short or long-term intubation/ventilator support, risk of death, and possible additional risks which may not currently be known at this time.

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.

Metabolic Status of Massive Weight Loss Patients- Your personal metabolic status of blood chemistry and protein levels may be abnormal following massive weight loss and surgical procedures to make a patient lose weight. Individuals with abnormalities may be a risk for serious medical and surgical complications, including delayed wound healing, infection or even in rare cases, death.

Smoking, Second-Hand Smoke Exposure, Nicotine Products (Patch, Gum, Nasal Spray, Vaping)-

Patients, who are currently smoking, use tobacco products, or nicotine products (patch, gum, nasal spray or vaping) are at a greater risk for significant surgical complications of skin dying, delayed healing, and additional scarring. Individuals exposed to second-hand smoke are also at potential risk for similar complications attributable to nicotine exposure. Additionally, smokers may have a significant 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 a significantly lower risk of this type of complication. Please indicate your current status regarding these items below-

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_____ I am a non-smoker and do not use nicotine products. I understand the risk of second-hand smoke exposure causing 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.

It is important to refrain from smoking at least 6 weeks before surgery and until your physician states it is safe to return, if desired.

It is highly recommended that you quit smoking before undergoing this procedure as it will adversely affect your outcome. Only under certain circumstances, clearly specified by your plastic surgeon, should this procedure be done on an individual who smokes.

Female Patient Information- It is important to inform your plastic surgeon if you use birth control pills, estrogen replacement, or if you believe 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 sexual activity 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.

Medications- There are many adverse reactions that occur as the result of taking over-the-counter, herbal, and/or prescription medications. 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. 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.

ADDITIONAL SURGERY NECESSARY

Should complications occur, additional surgery or other treatments may be necessary. Secondary surgery may be necessary to obtain optimal results. Even though risks and complications occur infrequently, the risks cited are particularly associated with brachioplasty. 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. With brachioplasty surgery, 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.

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Patient Compliance:

Follow all physician instructions carefully; this is essential for the success of your outcome. It is important that the surgical incisions are not subjected to excessive force, swelling, abrasion, or motion during the time of healing. Personal and vocational activities must be restricted. Protective dressings and drains should not be removed unless instructed by your plastic surgeon. Successful post-operative results depend on both surgery and subsequent care. Physical activity that increases your pulse or heart rate may cause bruising, swelling, or fluid accumulation. It is wise to refrain from intimate physical activities after surgery until your physician states it is safe. It is important that you participate in follow-up care, return for aftercare, and promote your recovery after surgery.

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), including no surgery. 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 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 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.

Medicine is not an exact science, so no guarantees can be made regarding complications or outcome. We do everything possible to ensure your safety, and strive for the best result in every case. We hope that you will also do your part by following your post-operative instructions, using good judgment and letting us know if there are any problems.

Please ask any questions you may have regarding the surgery or potential risks prior to signing this form. Your signature means that you have had a chance to read and discuss the common risks associated with brachioplasty surgery, and that you agree to proceed. A separate consent form from the hospital will also need to be signed for the medical record.

I CONSENT TO THE TREATMENT OF BRACHIOPLASTY AND I HAVE READ THE ABOVE LISTED ITEMS. I AM SATISFIED WITH THE INFORMED CONSENT PROCESS

Patient or Person Authorized to Sign for Patient

Date

Witness

Date