

PATIENT NAME: _____ AGE: _____ CHART NO: _____

It is my goal to provide you with some information about your desired procedure prior to our consultation. Please take the time to read this information and feel free to ask any questions during your face to face consultation. Additional information is available in the office and on our websites.

www.ocplasticsurgeons.com
www.doctordaneshmand.com
www.bakersfieldplasticsurgery.com

Dr. Daneshmand

Mastopexy (Breast Lifting) Consultation

GENERAL

- ▼ Surgery you do not need
- ▼ Purely elective surgery
- ▼ Long consultation
- ▼ Realistic Expectations
- ▼ Key to success

PROBLEM — MAMMARY PTOSIS (SAGGING OF THE BREASTS)

- The breast is a complex combination of breast tissue, fat and skin.
- ▼ Sagging results from the effects of breast weight and loss of skin elasticity
 - ▼ Involutional (loss of fullness with sagging of skin and drooping of the nipple sometimes follows pregnancy or excessive weight loss)

GOALS

- ▼ Establish normal position of breasts and nipples
- ▼ Improve size and contour (size may be left unchanged or may be increased or reduced)
- ▼ Maintain normal softness and sensitivity
- ▼ Maintain function (ability to breast feed)

LIMITATIONS

- ▼ Cannot uplift breasts without noticeable scars (around the nipple / Areola and usually on the skin of the breasts)
- ▼ Cannot eliminate "stretch marks"
- ▼ All humans are asymmetrical - symmetry may not result from these procedures

ALTERNATIVES

- ▼ No Surgery (any adverse effects?)
- ▼ Exercise
- ▼ Breast enlargement alone - for minor sagging
 - ✓ Tissue from your own body
 - ✓ Saline or silicone implants

Patient Initials: _____

ALTERNATIVES *(continued)*

- ▼ Uplifting alone (to re-contour and reposition breasts that are satisfactory in size but have unacceptable sagging)
 - ▼ Uplifting combined with implants (to re-contour and reposition breasts and also increase the size)
 - ▼ Uplifting combined with removal of some tissue (to reduce size of breasts)
-

GOALS MAY ONLY BE PARTIALLY MET

BREAST CANCER AND MASTOPEXY

- ▼ Incidence of breast cancer not increased or decreased
 - ▼ Physical examinations are not usually affected although some scar tissue will be present
 - ▼ Mammograms (breast x-rays) may be recommended prior to surgery to determine if any areas of suspicion are present that should be biopsied (removed and examined microscopically) prior to or during surgery
 - ▼ Mammograms may be done approximately 6-9 months after breast surgery
 - ▼ In mammograms of women with implants, parts of the breast tissue cannot be seen because of the implant. Special technique of mammograms may be required. These mammograms require a radiologist experienced in reading mammograms in patients with implants
 - ▼ Mammograms for patients with implants may be more expensive than routine mammograms
 - ▼ Silicone (as well as many other materials commonly used in human surgery) have been found to cause a very unusual cancer (fibrosarcoma) in laboratory rats. This is not breast cancer. This phenomenon appears to be unique to rats, not humans
-

SURGICAL TECHNIQUES, ANESTHESIA, FACILITY & RECOVERY

- ▼ Local anesthesia and sedation vs. general anesthesia
 - ▼ Outpatient surgery center vs. hospital
 - ▼ Outpatient vs. hospitalization
 - ▼ Restrictions / return to normal activities
 - ▼ Incisions
 - ▼ Dressings
-

TRADE OFFS

USUALLY TEMPORARY

- ▼ Discomfort (pain / sensitivity)
 - ▼ Discoloration / swelling
 - ▼ Numbness
 - ▼ Tightness / relaxation
 - ▼ Lumps / irregularities
 - ▼ Restricted activity
-

PERMANENT

- ▼ Scars - more extensive
 - ▼ Nipple / areola may be smaller
 - ▼ Numbness
 - ▼ Asymmetry
 - ▼ If implants used, tendency toward firmness if normal contracture occurs
 - ▼ Life need follow up
-

Patient Initials: _____

RISK / COMPLICATIONS

- ▼ Bleeding / blood collection, transfusion**
- ▼ Change in sensation
- ▼ Asymmetry
- ▼ Loss of pigmentation, loss of skin, loss of nipple / areola
- ▼ Excessive scarring (rare - elevated, "ropey" red, usually improves with time)
- ▼ Pain in incisions
- ▼ Nipple retraction / poor contour
- ▼ Implant failure (need to change, implants DO NOT last forever)
 - ✓ Benign tumors / granulomas from gel
 - ✓ Deflation inflatable
- ▼ Severe tightening of scar tissue around implant producing marked firmness
- ▼ Immune response
- ▼ If smoker - could result in nipple loss
- ▼ Pulmonary embolism
- ▼ Deep venous thrombosis

EVEN THOUGH ...

Even though the risks and complications cited above occur infrequently, they are the ones that are peculiar to this operation or of greatest concern. Other complications and risks can occur but are even more uncommon. The risks of surgery are comparable to the risks you take everyday when driving or riding in an automobile.

ANY AND ALL OF THE RISKS AND COMPLICATIONS CAN RESULT IN

- ▼ Additional surgery
- ▼ Hospitalization
- ▼ Time off work
- ▼ Expense to you

INSURANCE

Insurance usually does not cover this procedure. Treatment of complications may or may not be covered by insurance. On occasion, surgical revision may be indicated following the original surgery.

If planned or performed within one (1) year after the original surgery, and if insurance does not cover these revisions, there will be a small charge by the surgeon, anesthesia department and OR facility.

NO GUARANTEE

The practice of medicine and surgery is not an exact science. Although good results are expected, there cannot be any guarantee or warranty, expressed or implied, by anyone as to the results that may be obtained.

**** If a smoker** – Must be off cigarettes for **SIX (6)** weeks before surgery and remain off cigarettes for **SIX (6)** weeks after surgery. Much greater risk for scarring, poor healing, hair loss and skin loss in smokers.

**** Must be off all aspirin and blood thinning containing products (such as Advil, etc.)** for two (2) weeks before surgery and for two (2) weeks after surgery. (Check all medications with us. Tylenol is ok.)

Patient Initials: _____

QUESTIONS

If there is any item or items on this consultation sheet that you do not understand, mark it and call the office. An explanation or additional information will be provided. Share the information we provide to you with interested family members or friends. I will be happy to meet with them if you wish. All questions and uncertainties should be answered and clarified prior to your surgery. A WELL INFORMED PATIENT IS A HAPPY PATIENT!

DATE: _____ Copied and provided to patient by: _____

A copy of this consultation was provided to me: _____
(Patient's signature)

Patient Initials: _____