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American Board of Plastic Surgery

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PATIENT NAME:			AGE: CHART NO:		
	mation and fee	el free to as	r desired procedure prior to our consultation. k any questions during your face to face consultation bsites.		
www.ocplasticsurgeons.com www.doctordaneshmand.com www.bakersfieldplasticsurgery.com			Dr. Daneshmand		
	SMR - R	hinopla	sty Consultation		
CONDITION					
▼ Previous fracture / injury	Yes	No	Details:		
▼ Airway obstruction	Yes	No	Sometimes Details:		
▼ Septal deviation	Yes	No	Who diagnosed?		
	Details	:			
Appearance problem	Yes	No	Specifics:		
	What a	bout chin?			
▼ Allergy / hayfever / asthma	Yes	No	Details:		
▼ Sinus disease	Yes	No	Details:		
WHY HAVE THIS OPERATION	 ▼ Appearance Breathing problems: Yes No ▼ Self, not for others 				
WHAT IS USUALLY	▼ Airway if	obstructe	d		
HELPED BY RHINOPLASTY	▼ Alignme	nt if crook	ed		
	▼ Excess he	eight, widtl	and length		
GOALS	▼ Restore / maintain normal breathing				
	 Reduce asymmetries and improve / maintain alignment Create a nose that is more proportional and in better harmony with other 				
	facial fea		s more proportional and in oction harmony with ot		

LIMITATIONS

- ▼ Cannot take someone else's nose and put on you
- ▼ Portions of septum that obstruct may need to remain to insure structural support
- Crooked noses lend to drift back despite efforts to realign
- Asymmetries tend to persist
- ▼ Thick skin tends to re-drape poorly over altered structure limited contraction
- Appearance of nose tends to change post-operatively for many months

GOALS MAY ONLY BE PARTIALLY MET

ALTERNATIVES

- ▼ No treatment (any adverse effects?)
- ▼ Functional only to improve breathing
- ▼ Aesthetic (cosmetic) only to improve appearance
- Combination to improve breathing and appearance

SURGICAL TECHNIQUES, ANESTHESIA, FACILITY & RECOVERY

- ▼ Anesthesia local and sedation vs. general
- ▼ Outpatient surgery center vs. hospital
- ▼ Incisions / cartilage and bone removal / repositioning bone
- ▼ Occasional augmentation with bone, cartilage or synthetic implant
- ▼ Chin implant if indicated or desired
- ▼ Packing and splint
- Post-Op care and if needed hospitalization return to normal activities
- ▼ Blood transfusion

TRADE OFFS USUALLY TEMPORARY

- ▼ Discoloration / swelling
- ▼ Discomfort (pain / sensitivity)
- Numbness
- Airway obstructions / sinus obstruction
- ▼ Lumps and irregularities
- ▼ Induration ("woody" firmness)
- ▼ Restricted activity

PERMANENT

- ▼ Altered shape
- ▼ Internal nasal scars
- ▼ Numbness (rare)
- ▼ Airway obstruction
- ▼ External scars if:
 - ✓ Alar wedges removed to reduce flair of nostrils
 - ✓ Open rhinoplasty performed

RISK / COMPLICATIONS

- ▼ Internal scarring / adhesions
- ▼ Asymmetry
- ▼ Pain, persistent swelling
- Sensory loss (smell or sensation)
- External deformity
- ▼ Secondary septal deviation, persistent turbinate enlargement
- ▼ Sinus obstruction, bleeding, infection
- ▼ Loss of structural support, septal perforation
- ▼ Extrusion: bone / cartilage / synthetic graft / implant

Even though the risks and complications cited above occur infrequently, **EVEN THOUGH...** 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. Additional surgery ANY AND ALL OF THE RISKS Hospitalization AND COMPLICATIONS ▼ Time off work **CAN RESULT IN** ▼ Expense to you Insurance usually does not cover this procedure. Treatment of complications **INSURANCE** 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. The practice of medicine and surgery is not an exact science. Although good **NO GUARANTEE** 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 containing products for two (2) weeks before surgery and for two (2) weeks after surgery. (Check all medications with us. Some medications such as Motrin and Advil may also affect clotting.) If there is any item or items on this consultation sheet that you do not **QUESTIONS** 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 Conied and provided to nations b

DATE;	Copied and provided to patient by:		
A copy of this consultati	on was provided to me:		
17		(Patient's signature)	