

ARM LIFT (BRACHIOPLASTY) CONSENT

INFORMED CONSENT FOR BRACHIOPLASTY (ARM RESHAPING)

INSTRUCTIONS

This document contains information about brachioplasty (arm lift, arm reshaping) surgery, associated risks, and alternative treatment(s). Please read each paragraph thoroughly. If you have questions or see words you don't know, ask Dr. Laverson. Your signature below confirms that you understand the procedure, risks, and alternatives, and indicates your request for brachioplasty surgery.

GENERAL INFORMATION

Brachioplasty is a surgical operation during which excess skin and fat are removed from the upper arm. People electively brachioplasty if extra arm skin bothers them. Some feel self-conscious about the shape of their arms. Others limit their clothing or activity choices because of the extra hanging or wrinkled skin. Some are uncomfortable with uncontrolled mobility of this excess skin. Brachioplasty is not a surgical treatment for being overweight. Individuals who plan to lose weight should postpone body-contouring surgery until their weight has stabilized at the desired level.

Several techniques have been described for brachioplasty, but all involve the surgical removal of skin and fat from the arm between shoulder and elbow. The amount of skin removed, the pattern of skin removal, and the location of skin removal are variable, and somewhat individualized. The scar(s) resulting from brachioplasty depends on how much skin is removed and from where on the arms. Brachioplasty can be combined with other body-contouring procedures, including suction-assisted lipectomy (liposuction), or other elective operations.

ALTERNATIVE TREATMENTS

Brachioplasty is an elective surgical operation. There are both non-surgical and surgical treatment alternatives. The first alternative is no treatment at all, simply to camouflage extra arm skin and/or fat with clothing, and conceal in other ways that help you feel comfortable with this area of your body. Strength training to increase muscular bulk in the arms (biceps, triceps) may fill excess skin to some degree. Weight loss trims excess arm fat, and sometimes, skin will shrink down along with the diminished fat volume. Skin tightening radiofrequency devices such as Exilis®, Cooltouch®, Velashape®, Thermage®, and other devices may improve mild wrinkling of arm skin. Lipodissolve is a non-recommended treatment at this time, but may become a better understood alternative in the future.

One popular surgical alternative to brachioplasty is liposuction (suction-assisted lipectomy). This application removes fat from the arm through tiny openings. Liposuction does not remove excess skin. The advantage of liposuction over brachioplasty is that the scar is essentially invisible and/or non-existent. The disadvantage of liposuction is that if the arm has extra hanging skin in addition to fat or poor skin elasticity, skin will not likely shrink down after fat removal, but may hang even more visibly and pendulously. If this is the case, brachioplasty may be performed months or years after liposuction to remove the residual skin.

RISKS OF BRACHIOPLASTY SURGERY

Complications and problems occur frequently in plastic surgery. Usually, they are minor problems that Dr. Laverson is expert at managing and solving so the final result is not compromised, but not always. You should understand risks of brachioplasty and potential complications before having this procedure. Dr. Laverson knows about these problems, and incorporates planning and techniques to avoid them. Still, the natural course of healing varies among individuals, and unknown situational factors contribute. Many complications cannot be predicted in advance. The brachioplasty procedure has intrinsic limitations. Your decision for brachioplasty (or any elective procedure) is based on a comparison of risks to expected benefit. Although most patients do not experience these complications, be aware that they have happened, and may happen in your case. Before proceeding, you should understand all possible consequences of brachioplasty.

Specific Risks of Brachioplasty Surgery

Change in Sensation: Diminished, absent, or changed skin sensation is common in and adjacent to areas that have had surgery. Nerves to the skin are stretched, repositioned, and injured. Resulting changes in sensation are most often temporary (weeks to months). Rarely, permanent changes in sensation of hands and forearms develop after brachioplasty. Diminished (or complete) loss of skin sensation may not totally resolve after brachioplasty. Hypersensitivity of arm skin may develop after brachioplasty.

Skin Discoloration/Swelling: Bruising and swelling normally occur 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.

Sensation of Arm Tightness: After lifting the arm skin, there is usually a sensation of the arm skin being tight. Usually this feeling subsides over time. Additional surgery may be required to correct this problem.

Stiffness of Shoulder and/or Elbow: To facilitate healing, Dr. Laverson will ask that you not excessively move the shoulders and elbows for several weeks after brachioplasty. This immobility, combined with scarring and skin tightness after surgery, will lead to stiffness of shoulders and elbows. After your brachioplasty skin wounds have healed, Dr. Laverson will encourage range of motion exercises of your shoulders and elbows to restore normal flexibility and motion in these joints. Permanent stiffness of shoulders and elbows is rare, but possible after brachioplasty.

Pain: You will have pain in the arms 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.

General Risks of Surgery

Healing Issues: Certain medical conditions, dietary supplements and medications may delay and interfere with healing. People who have lost massive amounts of weight (e.g. after gastric bypass or other bariatric surgery) may have healing problems that cause incisions to come apart, cause infection, and require additional medical care, surgery, and/or prolonged hospitalizations. Healing is often impaired in diabetics and in patients taking corticosteroids and certain other medications. Smoking delays healing, often causing wound separation and delayed healing with more noticeable scars. Additional general risks include the possibility of additional surgery, prolonged recovery, skin color changes, arm shape changes, surface irregularities, infection, a result that does not meet your goals and expectations, and added expense for management or correction of these problems. Patients with significant quantities of loose skin will still have excess skin after surgery, but less of it on the arms. Skin characteristics will not change. As swelling and tightness resolve, some recurrence of loose skin will be noticed.

Bleeding: It is possible, though unusual, to bleed abnormally and/or excessively during or after surgery. Should this happen, emergency treatment to stop bleeding and/or drain accumulated blood and blood clot may be recommended. Rarely, blood transfusion may be required. Increased activity too soon after surgery can cause bleeding and additional surgery. Please follow postoperative instructions. Limit exercise and strenuous activity for days to weeks. Do not take any aspirin or anti-inflammatory medications (acetaminophen OK) for at least ten days before or after surgery, because these medications increase the risk of bleeding. Non-prescription "herbs" and dietary supplements can also increase the risk of surgical bleeding. Hematoma (bleeding beneath the skin) may occur at any time, usually in the first three weeks following surgery. If blood transfusions are necessary 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. If your wounds become infected, additional treatment including antibiotics, surgical drainage, and other measures may be necessary. Tell Dr. Laverson of any infections or inflammation you have elsewhere on your body before brachioplasty, such as ingrown toenail, insect bite, or urinary tract infection. Concurrent infections in other parts of the body, may cause infection in the operated area.

Scarring: All surgery leaves scars, some more visible than others. Although good wound healing after brachioplasty is expected, abnormal scars may develop within skin and deeper tissues. Scars may be unattractive and of different color than the surrounding skin tone. Scar appearance may vary within the same scar. Scars may be asymmetric (appear different on the right and left side of the body). Visible suture marks may be present adjacent to the main scar. Sometimes, scars require surgical revision or treatment.

Firmness: Excessive firmness and arm stiffness can occur after surgery due to internal scarring. The occurrence of this is not predictable. Additional treatment including surgery may be necessary.

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 be chronic.

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

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 suture removal.

Delayed Healing: Wound disruption or delayed wound healing is possible. Some areas of skin may not heal normally and may take a long time to heal. Areas of skin may die, resulting in a foul-smelling wound. This may require frequent dressing changes or further surgery to remove non-healed tissue. Individuals who have decreased blood supply from past surgery or radiation therapy are at increased risk for delayed wound healing and poor surgical outcome. **Smokers have a greater risk of skin loss and wound healing complications.**

Damage to Deeper Structures: Injury to deeper structures including nerves, blood vessels, muscles, and lungs (pneumothorax) is possible during any surgical procedure. The potential for this to occur depends upon the type of procedure being performed. Injury to deeper structures may be temporary or permanent.

Fat Necrosis: Areas of fat beneath your skin might die. This results in hard nodules (fat necrosis) beneath skin. Surgery to remove fat necrosis may be indicated or desired. Fat necrosis may cause contour irregularities.

Seroma: Infrequently, fluid accumulates beneath your skin following surgery. A drain is inserted during brachioplasty to prevent fluid accumulation. Sometimes, the drain does not function properly, or becomes obstructed. Sometimes, fluid accumulates after the drain is removed. If you develop a seroma, serial office aspiration usually causes it to resolve. Rarely however, additional surgery is required.

Surgical Anesthesia: Both local and general anesthesia involve risk. There is a possibility of complications, injury, and even death from all forms of surgical anesthesia or sedation.

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 will be necessary.

Cardiac and Pulmonary Complications: Pulmonary (lung) complications may occur from blood clots (pulmonary emboli), fat deposits (fat emboli), or partial collapse of the lungs after general anesthesia. Pulmonary emboli can be life-threatening or fatal. Inactivity and other conditions may increase the incidence of blood clots traveling to the lungs causing a major blood clot that can result in death. Discuss with Dr. Laverson any past history of swelling in your legs or blood clots that may contribute to this condition. Cardiac (heart) complications are a risk with any surgery and anesthesia, even in patients without symptoms. If you experience shortness of breath, chest pain, or unusual heart beats, seek medical attention immediately. Should any of these complications occur, you may require hospitalization and additional treatment.

Allergic Reactions after Plastic Surgery: In rare cases, skin 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 in response to drugs used during surgery and prescription medicines. Allergic reactions may require additional treatment.

Asymmetry: Symmetrical body appearance will not result after surgery. Factors such as skin tone, fat distribution, skeletal prominence, and muscle tone cause normal asymmetries of the human body. Plastic surgery procedures are planned for symmetry, but absolute symmetry is impossible. Most patients have differences between the right and left side of their bodies before any surgery is performed. Additional surgery may be necessary to attempt to diminish asymmetry.

Surgical Wetting Solutions: Large volumes of fluid containing dilute local anesthetic drugs and epinephrine that are injected into fat during cosmetic surgery may cause fluid overload or a systemic reaction to these medications. Additional treatment including hospitalization may be necessary.

Persistent Swelling (Lymphedema): Persistent swelling of arms and hands can occur following plastic surgery of the arms.

Disappointing and/or Unsatisfactory Result: Although good results are expected, there is no expressed or implied guarantee or warranty that your plastic surgery results will be as expected. You may be disappointed with the results of plastic surgery. Asymmetry, unanticipated shape and size, loss of function, wound disruption, poor healing, stiffness, and loss of sensation may occur after surgery. Size may be incorrect. Scar location or appearance may be unsatisfactory. Additional plastic surgery may be needed to improve your results.

ADDITIONAL ADVISORIES

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

Patients who are currently smoking or use tobacco or nicotine products (patch, gum, or nasal spray) are at a greater risk for significant surgical complications of the lungs, of skin dying, of delayed healing and of additional scarring. Individuals exposed to second-hand smoke are also at risk for these complications, attributed to nicotine exposure. Smoking may have a negative effect on anesthesia and recovery from anesthesia, with coughing and increased bleeding. Individuals who are not exposed to tobacco smoke or nicotine-containing products have a lower risk of these complications after plastic surgery.

Refrain from smoking at least 6 weeks before plastic surgery and until Dr. Laverson states it is safe to resume, if desired. Your signature below indicates that you will inform Dr. Laverson if you continue smoking (even one cigarette, cigar, or pipe tobacco) within this time frame. You must also understand that for your safety, plastic surgery may be delayed if you smoke within six weeks before your procedure.

Medications and Herbal Dietary Supplements: Give Dr. Laverson an accurate accounting of all medications and supplements you take regularly. He may advise you to continue taking these medications, to stop these medications temporarily, or may speak with your other physician(s) to get advice about what is best in your situation. Adverse reactions may result from over-the-counter, herbal, and/or prescription medications. Aspirin and medications that contain aspirin interfere with clotting and can cause increased bleeding and bruising after plastic surgery. Such medications include non-steroidal anti-inflammatories such as Motrin, Advil, Aleve, and other brands. It is very important not to stop drugs that interfere with platelets, such as Plavix, which is used after a stent. It is important if you have had a stent and are taking Plavix that you inform Dr. Laverson. Stopping Plavix may result in a heart attack, stroke and even death. Ask Dr. Laverson about interactions with drugs you are already taking. If you have an adverse reaction, stop taking the suspected drug(s) immediately and call Dr. Laverson for further instructions 858-295-1592. If the reaction is severe, go immediately to the nearest emergency room.

When taking the prescribed pain medications after plastic surgery, be aware they can affect your thought process and coordination. Do not drive, do not operate complex equipment, do not make any important decisions, and do not drink any alcohol while taking these medications. Take your prescribed medication only as directed. If you have questions, call Dr. Laverson 858-295-1592.

Sun Exposure – Direct or Tanning Salon: Strong direct sun exposure (ultraviolet rays) is damaging to skin. After plastic surgery, sun exposure may result in color changes to skin and/or scar. Dr. Laverson may (or may not) recommend that you avoid tanning immediately and for some time following plastic surgery. Damage from sun exposure may occur even with sun block or clothing covering the sun exposed area.

Travel and Return to Work Plans: Complications after plastic surgery may delay healing. Your return to normal life may be unexpectedly prolonged. Inform Dr. Laverson of upcoming travel plans, important commitments already scheduled, or important time demands so that your plastic surgery can be appropriately timed. There is no guarantee that you will be able to resume all activities within the planned and/or desired time frame.

Long-Term Results: After plastic surgery and over the course of your subsequent life, changes in the appearance of your body result from aging, sun exposure, weight fluctuation, pregnancy, menopause or other circumstances not related to your surgery.

Body-Piercing Procedures: Sites of body piercing may become infected after plastic surgery. You will be asked to remove jewelry prior to your procedure. If the piercing is in the area of your surgery, do not replace it until advised by Dr. Laverson. If you cannot remove your jewelry, please advise Dr. Laverson and/or the pre-operative nurse so the jewelry, piercing, and surrounding skin can be protected during your operation.

Female Patient Information: Inform Dr. Laverson if you take birth control pills, estrogen replacement, or if you may be pregnant. Many medications including antibiotics may neutralize the preventive effect of birth control pills, allowing for conception and pregnancy.

Sexual Activity After Surgery: During plastic surgery, bleeding is controlled by cauterizing vessels. Dr. Laverson performs anatomically precise plastic surgery. His custom and practice is to keep the surgical field bloodless. Excessive movement or physical activity after plastic surgery may re-open cauterized vessels. Bleeding may result, even days after your procedure. Rest is therefore advised after surgery, and this includes avoiding sex for a reasonable period of time. Activity that increases your pulse or heart rate may cause abnormal bruising, swelling, or bleeding. Re-operation may be required to control bleeding. Resume sexual activity when you resume other similarly active pursuits.

Mental Health Disorders and Elective Surgery: Realistic expectations for the results of plastic surgery are important. The usual outcome is improvement. Perfection is never achieved. Complications or less than satisfactory results are sometimes unavoidable, may require additional surgery, and often are stressful. Please openly discuss with Dr. Laverson, prior to surgery, any history you have of emotional depression or mental health issues. Although most people benefit psychologically from the results of cosmetic surgery, effects on mental health cannot be accurately predicted.

ADDITIONAL SURGERY NECESSARY (Re-Operations)

Many conditions and situations influence the outcome of cosmetic plastic surgery. It is unknown how your tissue may respond or how wound healing will occur after surgery. Secondary surgery may be necessary to perform additional tightening or repositioning of body structures. Should complications occur, additional surgery or other treatments may be necessary. Although complications occur infrequently, those described above are particularly associated with brachioplasty. Other complications may occur but are less likely. The practice of medicine and surgery is not an exact science. Although good results are expected, they cannot be guaranteed. Plastic surgery does not come with any warranty. It may not be possible to achieve optimal results with a single surgical procedure. Multiple (serial) staged operations may be required to produce your desired final outcome.

PATIENT COMPLIANCE

Follow all of Dr. Laverson's instructions carefully; this is essential for a successful outcome. If you have questions about these instructions, call Dr. Laverson at 858-295-1592. Surgical incisions must not be subjected to excessive force, swelling, abrasion, or motion during healing. Personal and vocational activity must be restricted. Protective dressings and drains should not be removed unless instructed by Dr. Laverson. A good result depends on details of your plastic surgery procedure and also on your subsequent care. Physical activity that increases your pulse or heart rate may cause bleeding, bruising, swelling, fluid accumulation, wound separation, and re-operation. Following post-surgical instructions and returning for post-surgical appointments is important to promote healing and result in the best possible outcome.

HEALTH INSURANCE

Health insurance benefits exclude cosmetic plastic surgery. Sometimes, treatment of complications after plastic surgery are covered. Dr. Laverson enrolls you in **Cosmetasure**, a limited policy that offers financial assistance for certain unexpected complications. Please read your health insurance contract if you have specific questions about covered benefits. Revision plastic surgery to improve your aesthetic outcome is not a covered benefit.

FINANCIAL RESPONSIBILITIES

The cost of surgery involves several charges for services provided. The total includes federal, state, and local taxes, licensing and accreditation fees, pre-surgical screening, recovery room, administrative costs, Dr. Laverson's office expenses, Surgery Center expenses, medications, equipment, supplies, post-surgical bandages and/or garment(s), sterile processing, the Anesthesiologist's bill, and other incidentals. The cost of this procedure does not include additional procedures that may be required to revise, optimize, or complete your outcome. Additional expenses may be incurred if complications develop after brachioplasty. **In signing the consent for brachioplasty, you acknowledge that you have been informed about its risks and consequences and accept responsibility for clinical decisions that were made along with the financial costs of all future treatments.**

DISCLAIMER

This document contains information about plastic surgical treatment of a condition, about risk of the treatment, and about alternatives to the treatment, 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, this informed-consent document should not be considered all-inclusive in defining other methods of care and risks encountered. Dr. Laverson may provide additional or different information based on all the facts in your situation 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 of an individual case, and are subject to change as scientific knowledge and technology advance and as practice patterns evolve.

Understand the above information before signing the consent below.

CONSENT FOR BRACHIOPLASTY (ARM LIFT/RESHAPING)

1. It is now hereby requested that Dr. Steve Laverson and assistant(s) perform **BRACHIOPLASTY ("ARM LIFT")** surgery upon me. Information about risks of brachioplasty and alternative treatments described above is understood by me. My questions about brachioplasty have been answered to my satisfaction.
2. Rarely, during the course of an operation and medical treatment or anesthesia, unforeseen conditions demand different procedures than those initially planned. Dr. Laverson is authorized to perform such other procedures that are in the exercise of his professional judgment necessary, desirable, and in my own best interest. The authority granted under this paragraph includes conditions that require treatment but 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. I understand what my surgeon can and cannot do, and I understand there are no warranties or guarantees, implied or specific about my outcome. I have had the opportunity to explain my goals and understand which desired outcomes are realistic and which are not. All of my questions have been answered, and I understand intrinsic (specific) risks of brachioplasty, and additional risks and complications, benefits, and alternatives. Understanding all of this, I elect to proceed.

5. I consent to photography before and after brachioplasty, including appropriate portions of my body, for medical, scientific or educational purposes.
6. I consent to the disposal of any tissue, medical devices, or body parts which may be removed.
7. Although rare and completely unexpected, I consent to receive blood products should they be deemed necessary by Dr. Laverson. I am aware of potentially significant risks to my health with their utilization.
8. I understand that Dr. Laverson's fees are separate from the anesthesia and surgery center charges, and the fees are agreeable to me. If secondary surgery is necessary, further expenditure may be required.
9. I realize that not having brachioplasty is an option. Nobody is forcing me to have this surgery.
10. IT HAS BEEN EXPLAINED TO ME IN A WAY THAT I UNDERSTAND:
 - a. BRACHIOPLASTY (ARM LIFT / ARM RESHAPING) SURGERY
 - b. ALTERNATIVE PROCEDURES AND TREATMENTS
 - c. RISKS OF BRACHIOPLASTY

I REQUEST AND CONSENT TO BRACHIOPLASTY SURGERY AND THE ABOVE LISTED ITEMS (1-10).

I AM SATISFIED WITH THE EXPLANATION.

Patient or Person Authorized to Sign for Patient

Date _____ Witness _____