



INFORMED CONSENT

BLEPHAROPLASTY SURGERY

This is an informed-consent document that has been prepared to help inform you about Blepharoplasty Surgery, its risks, and alternative treatments.

GENERAL INFORMATION

Blepharoplasty is a surgical procedure to remove excess skin and muscle from both the upper and lower eyelids. Underlying fatty tissue that produces bagginess can be selectively removed or repositioned. Blepharoplasty can improve drooping skin and bagginess. It can help improve vision in older patients who have hooding of their upper eyelids. Although it can add an upper eyelid crease to the Asian eyelid, it will not erase evidence of one's racial or ethnic heritage. Blepharoplasty will not remove "crow's feet" or other wrinkles, eliminate dark circles under the eyes, or lift sagging eyebrows.

Blepharoplasty surgery is customized for every patient, depending on his or her particular needs. It can be performed alone involving upper, lower or both eyelid regions, or in conjunction with other surgical procedures of the eye, face, brow, or nose. In some patients, who have looseness between the lower eyelid and the eyeball, consideration for tightening of the lower eyelid (canthoplasty/canthopexy) at the time of blepharoplasty may be recommended. Eyelid surgery cannot stop the process of aging. It can however, diminish the look of loose skin and bagginess in the eyelid region.

ALTERNATIVE TREATMENTS

Alternative forms of management include not treating the skin laxness and bagginess in the eyelids by surgery. Improvement of skin laxness, fatty deposits and skin wrinkles may be accomplished by other treatments or surgery such as a brow lift when indicated. Other forms of eyelid surgery may be needed should you have disorders affecting the function of the eyelid such as drooping eyelids from muscle problems (eyelid ptosis) or looseness between the eyelid and eyeball (ectropion). Minor skin wrinkling may be improved through chemical skin-peels, laser resurfacing, or other skin treatments. Risks and potential complications are associated with alternative surgical forms of treatment.

RISKS OF BLEPHAROPLASTY 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 understand all possible consequences of blepharoplasty surgery.

- ◆ **Bleeding.** It is possible, though unusual, to experience a bleeding episode during or after surgery. Bleeding may occur under the skin or internally around the eyeball. Should post-operative bleeding occur, it may require emergency treatment, surgery, or blood transfusion. Do not take any aspirin or anti-inflammatory medications for ten days before or after surgery, as this may increase the risk of bleeding. Non-prescription "herbs" and dietary supplements can increase the risk of surgical bleeding. Hypertension (high blood pressure) that is not under good medical control may cause bleeding during or after surgery. Accumulations of blood under the eyelids may delay healing and cause scarring. Hematoma can occur at any time following injury. If blood transfusions are needed to treat blood loss, there is a risk of blood-related infections such as hepatitis and HIV. Heparin medications that are used to prevent blood clots in veins can produce bleeding and decreased blood platelets.
- ◆ **Blindness.** Blindness is extremely rare after blepharoplasty. However, it can be caused by internal bleeding around the eye during or after surgery. The occurrence of this is not predictable.
- ◆ **Infection.** Infection is unusual after surgery. Should an infection occur, additional treatment including antibiotics, hospitalization, or additional surgery may be necessary.



- ◆ **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 eyelid and deeper tissues. Scars may be unattractive and of different color than the surrounding skin tone. Scar appearance may also vary within the same scar. Scars may be asymmetrical (appear different on the right and left side of the body). There is the possibility of visible marks in the eyelid or small skin cysts from sutures. In some cases scars may require surgical revision or treatment.
- ◆ **Damage to Deeper Structures.** There is the potential for injury to deeper structures including nerves, blood vessels, and eye muscles during any surgical procedure. The potential for this to occur varies according to the type of blepharoplasty procedure performed. Injury to deeper structures may be temporary or permanent.
- ◆ **Dry Eye Problems.** Permanent disorders involving decreased tear production can occur after blepharoplasty. The occurrence of this is rare and not entirely predictable. Individuals who normally have dry eyes may be advised to use special caution in considering blepharoplasty surgery.
- ◆ **Asymmetry.** The human face is normally asymmetrical. There can be a variation from one side to the other in the results obtained from blepharoplasty surgery. Additional surgery may be necessary to attempt to revise asymmetry.
- ◆ **Pain.** You will experience pain after your surgery. Pain of varying intensity and duration may occur and persist after blepharoplasty surgery. Chronic pain may occur very infrequently from nerves becoming trapped in scar tissue.
- ◆ **Ectropion.** Displacement of the lower eyelid away from the eyeball is a rare complication. Further surgery may be required to correct this condition.
- ◆ **Corneal Exposure Problems.** Some patients experience difficulties closing their eyelids after surgery and problems may occur in the cornea due to dryness. Should this rare complication occur, additional treatments or surgery and treatment may be necessary.
- ◆ **Allergic Reactions.** In rare cases, local allergies to tape, suture materials 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.
- ◆ **Eyelash Hair Loss.** Hair loss may occur in the lower eyelash area where the skin was elevated during surgery. The occurrence of this is not predictable. Hair loss may be temporary or permanent.
- ◆ **Delayed Healing.** Wound disruption or delayed wound healing is possible. Some areas of the skin may not heal normally and may take a long time to heal. 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.
- ◆ **Change in Skin Sensation.** It is common to experience diminished (or loss) of skin sensation in areas that have had surgery. Diminished (or complete loss of skin sensation) may not totally resolve after a blepharoplasty.
- ◆ **Skin Contour Irregularities.** Contour irregularities and depressions may occur after blepharoplasty. Visible and palpable wrinkling of skin can occur. Residual skin irregularities at the ends of the incisions or "dog ears" are always a possibility and may require additional surgery. This may improve with time, or it can be surgically corrected.
- ◆ **Skin Discoloration & Swelling.** Some bruising and swelling normally occurs following blepharoplasty. The skin in or near the surgical site can appear either lighter or darker than surrounding skin. Although uncommon, swelling and skin discoloration may persist for long periods of time and, in rare situations, may be permanent.
- ◆ **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.
- ◆ **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.
- ◆ **Surgical Anesthesia.** Both local and general anesthesia involves risk. There is the 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 would be necessary.
- ◆ **Seroma.** Fluid accumulations infrequently occur in between the skin and the underlying tissues. Should this problem occur, it may require additional procedures for drainage of fluid.
- ◆ **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 eyelid surgery. This would include risks such as asymmetry, unsatisfactory surgical scar location, unacceptable visible deformities, loss of function, poor healing, wound disruption, and loss of sensation. It may be necessary to perform additional surgery to improve your results. Additional surgical procedures such as a brow lift may be needed to correct eyebrow sagging which contributes to upper eyelid problems.
- ◆ **Cardiac & 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 or swollen legs 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

- ◆ **Long-Term Results.** Subsequent alterations in eyelid appearance may occur as the result of aging, weight loss or gain, sun exposure, pregnancy, menopause, or other circumstances not related to blepharoplasty surgery. Blepharoplasty surgery does not arrest the aging process or produce permanent tightening of the eyelid region. Future surgery or other treatments may be necessary to maintain the results of a blepharoplasty.
- ◆ **Skin Disorders & Skin Cancer.** A blepharoplasty is a surgical procedure to tighten the loose skin and deeper structures of the eyelid. Skin disorders and skin cancer may occur independently of eyelid surgery.
- ◆ **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.

SMOKING & NICOTINE — PLEASE READ CAREFULLY

Smoking and nicotine in any form — cigarettes, cigars, vaping, chewing tobacco, patches, gum, or lozenges — and exposure to second-hand smoke significantly increase the risk of serious complications, including poor wound healing, skin and tissue death (necrosis), increased scarring, infection, blood-flow problems, anesthesia complications, and, in some cases, failure of the procedure.

I understand that smoking, nicotine, and second-hand smoke raise these risks, that I should avoid them for at least four weeks before surgery and throughout my recovery, and that I must tell my surgeon if I use any nicotine product. Using nicotine around the time of surgery increases the risk of complications and may cause my surgeon to postpone or decline the procedure.



- ◆ **Mental Health Disorders & 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

There are many variable conditions in addition to risk and potential surgical complications that may influence the long-term result of eyelid surgery. Secondary surgery may be necessary to obtain optimal results. Even though risks and complications occur infrequently, the risks cited are the ones that are particularly associated with blepharoplasty surgery. Other complications and risks can occur but are even more uncommon. Should complications occur, additional surgery or other treatments may be necessary. 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. In some situations, it may not be possible to achieve optimal results with a single surgical procedure.

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 activity needs to be restricted. Protective dressings and drains should not be removed unless instructed by your plastic surgeon. Successful post-operative function depends on both surgery and subsequent care. Physical activity that increases your pulse or heart rate may cause bruising, swelling, fluid accumulation and the need for return to surgery. 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.

HEALTH INSURANCE

If hooding of the upper eyelids interfere with your vision, your health insurance company may cover blepharoplasty surgery for the upper-eyelids only. Most health insurance companies exclude coverage for cosmetic surgical operations such as the lower-eyelid blepharoplasty or any complications that might occur from surgery. Most insurance plans exclude coverage for secondary or revisionary surgery. Please carefully review your health insurance subscriber information pamphlet.



FINANCIAL RESPONSIBILITIES

The cost of surgery involves several charges for the services provided. The total includes fees charged by your surgeon, the cost of surgical supplies, anesthesia, laboratory tests, and possible outpatient hospital charges, depending on where the surgery is performed. Depending on whether the cost of surgery is covered by an insurance plan, you will be responsible for necessary co-payments, deductibles, and charges not covered. The fees charged for this procedure do not include any potential future costs for additional procedures that you elect to have or require in order to revise, optimize, or complete your outcome. Additional costs may occur should complications develop from the surgery. Secondary surgery or hospital day-surgery charges involved with revision surgery will also be your responsibility. In signing the consent for this surgery/procedure, you acknowledge that you have been informed about its risk and consequences and accept responsibility for the clinical decisions that were made along with the financial costs of all future treatments.

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 which 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.

I have read and understand this information, I have had the opportunity to ask questions and have received satisfactory answers, and I consent to the procedure and treatment described above.

Patient or person authorized to sign for patient

Date

Witness signature

Date