



## Informed consent – face and neck lifting

Name and Surname:

Birth number (for foreigners, passport number and date of birth):

Residence:

Tel./e-mail

(hereinafter also "Client")

### Dear Madam, Dear Sir ,

We are really pleased that you have chosen our clinic. Our entire team of our clinic is ready to do everything to ensure that the postoperative procedure turns out to your satisfaction. We hope that the combination of state-of-the-art equipment, the surgical skill of our doctors, the kindness and dedication of our nurses will help turn your aesthetic or health problem into the joy of the subsequent result. We wish you a pleasant stay at our clinic.

### Principle of operation:

With the help of this procedure, we remove the excess skin on the cheeks and neck. The skin turns off and some noticeable wrinkles are partially smoothed out . Simply removing the excess skin is not enough to achieve a long-term effect, because the facial skin is again easily released by the natural process of aging and gravity. In order to effect transactions significantly extended, perform lifting not only the skin but also the connective tissue-muscle VRST you stored just under the skin, which provides support for the long-term strength of the skin.

At our clinic we perform several types of facelifts:

SMAS lift .....

Neck lift .....

The individual types of facelifts differ depending on where the incision is made, how long it is and how much skin is loosened and removed.

### How does the operation work?

We perform face lift and / or necklifting under general anesthesia . The procedure is performed first on one side and then on the other side of the face. The surgical incision will be explained and described by your doctor for a consultation. Then we mobilize (release) the skin from the base and remove its excess. Then turn off the above-mentioned fibrous muscle structures stored in the subcutaneous tissue. Finally, the skin edges are sutured again with individual stitches . Plastic tubes (drains) are inserted into the subcutaneous tissue , which drain blood and tissue secretions in the first hours. The procedure terminates placing the total dressing head and neck. The day after the operation, we perform a complete dressing with removal of drains. We perform other dressings and inspections according to the operator 's instructions. 2nd week after the operation, healing without a bandage is already taking place.

### Before surgery:

No cigarettes, either heated or vaporized, 4 weeks before surgery and two weeks after surgery. Nicotine may be replaced with patches, gum, sprays or chewing tobacco.

### Possible complications after the procedure:

**There is no surgical procedure that cannot cause complications.**

Complications during the operation are very rare, but despite great caution and technically correct execution, complications can occur during it or in the postoperative period.

- **Bleeding** may occur during the operation, but especially during the postoperative period, due to the necessary intervention in the blood vessels during the operation. Bleeding is immediately stopped by electrocoagulation, followed by light capillary bleeding by the above-mentioned drains. If postoperative bleeding is more intense, postoperative revision under anesthesia (analgesia) should be performed. This complication does not affect the final effect of the operation, it only prolongs the healing process.

- **Seroma** - this is the formation of fluid in the surgical wound immediately after the procedure and later, which is manifested by pain and enlargement of the operated part. The most common cause is numerous physical exertions after surgery or excessive sports activity or injury.

- **Bruises** - around the postoperative wound spontaneously subside within a few weeks, their extent is individual.

- **Disorder of scar healing** - if the scars are under tension, they may spread, exceptionally, hypertrophic, pigmentary and keloid scars may occur.

- **Infection** in the surgical wound is rare and is most often caused by live bacterial strains in the skin glands. In the case of early treatment, it does not affect the final effect of the procedure.

- **Injuries to nerves** in the face can lead to a temporary feeling of decreased sensitivity of the face and neck and in the operated area and over time it returns to normal, exceptionally there may be a disorder of facial expressions.

- **Death of the skin parts** most often behind the **auricles** due to reduced blood circulation is again very rare and most often occurs in smokers.

**The effect of the operation is usually long-term** for 7-10 years. The operation can be supplemented by liposuction of the chin or plastic surgery of the upper eyelids. The operation can be repeated once or twice in the following years.

**The patient is obliged to :**

Inform the treating physician about all past and current diseases, allergies and medications used (especially about medicines that affect blood clotting and bleeding).

**How to behave after surgery:**

Regular post-procedure check-ups and strict adherence to home post-operative care are an important part of treatment and are therefore essential for a good healing process.

- Carry out regular inspections, in case of uncertainty or the occurrence of any problem, contact the doctor immediately
- Protect scars from sunlight for 3-4 months SPF 30 and above

If you have any problems or questions after the procedure, do not hesitate to contact us immediately. Only your doctor will give you the best advice.

**Please bring to the hospital:**

- the results of the preoperative examination, which must not be older than 14 days, you cannot be admitted to the operation without presenting this examination
- ID card and health insurance card
- medicines you normally take - give these medicines to a nurse when you receive them and they will be given to you so as not to interfere with the effect of the medicines given in connection with the operation
- toothbrush, toothpaste, cosmetics you use
- You will receive everything else (clothes , overshoes , bathrobe, towel, etc.) from us

**Please follow these instructions before the procedure:**

- perform thorough hygiene in the evening before the procedure, including washing the hair, we do not recommend coloring the hair at least one month before the procedure
- shorten at least one nail (index or middle finger) on the non-dominant hand.
- we do not recommend undergoing hair extensions before this procedure
- arrange an escort with an escort on the expected day of release , if this is not in your power, we will arrange a taxi for you

**Please follow the instructions before general anesthesia carefully - see " Recommendations before general anesthesia " for anesthesiologists. In case of any ambiguity or deviation in the result of the preoperative examination, both the operating doctor and the anesthesiologist reserve the right to withdraw from the procedure, which is to withdraw from the aesthetic indication , even on the day of the procedure. The procedure can be postponed, if possible, only after the client's medical compensation.**

**Informed consent to the operation:**

As the undersigned client bellow, I agree with my planned plastic surgery of the face, about the method of performing the procedure, the type of anesthesia, hospitalization during the healing process, expected results and possible complications, as well as the cost of performance and other performance related operations.

After talking to the doctor, I know everything, I am sufficiently informed and the doctor answered all the questions I asked. I have no further supplementary questions and I feel sufficiently informed. Voluntarily and after a sufficient period of reflection, I decided to undergo the planned procedure.

**I agree according to the type of procedure with the need for preoperative examination.**

In order to perform the the surgery, I **agree with the proposed hospitalization.**

From a medical point of view, I **agree with the necessary measures** requiring possible further intervention in case of unexpected complications, the possible financial compensation of which I am able to pay.

**At the same time, I confirm that in the event of unexpected complications** requiring urgent further procedures necessary to save my life or health, I agree to perform all other necessary and urgent procedures necessary to save my life and health, I also confirm that I agree to the possible administration of blood - transfusion.

In the event that I do not have health insurance in the Czech Republic, I agree that from a medical point of view to the necessary measures in case of unexpected complications, such as further hospitalization in a specialized department and also with full financial reimbursement of hospitalization and other procedures relating to this complications.

**I agree / I do not agree** that these people should be informed about my health

(name , surname, relationship to the patient ):

.....

**I agree / Disagree** with the publication of the results of the procedures in the form of photo documentation for presentation or educational purposes:

- a) for internal use
- b) publication on a website

At the same time, the client gives his explicit consent to the processing and storage of his personal data for the needs of the Clinic. The Client and the Clinic expressly agree that all mutual legal relations are governed by Czech law. The participants undertake to always try to resolve any disputes by agreement. In the event that the parties fail to resolve these matters by agreement, the Client and the Clinic agree on the application of Czech law and the jurisdiction of the Czech courts in case of a dispute resolved by a court, provided that the competent court resolves all disputes arising The client and the Clinic are the locally competent general court, determined according to the seat of the Clinic.

Date:

Client's signature:

Doctor's signature:

**Client's signature:**