

## Informed consent and education about plastic surgery - thigh and/or arm tuck surgery

Gentlemen:

Social security number (passport number and date of birth for foreigners):

Residence:

Tel./e-mail

(hereinafter also "Client")

**Dear Madam, dear Sir,**

after an examination and mutual agreement, you were offered the opportunity to solve your request for the adjustment of the **thighs....., and/or..... arms**, which is carried out by our Clinic and on the basis of which, according to the knowledge of contemporary medicine, during an uncomplicated course of postoperative healing, what should be achieved the best aesthetic result. We are obliged to provide you with all the information that will deepen your knowledge of the planned medical procedure and enable you to make an informed decision about its implementation or rejection.

### **Principle of operation:**

The procedure is performed under general or local anesthesia. There are several different modifications, but the principle is similar. From variously situated and oriented incisions (in the armpit, on the inner surface of the arm, in the groin, etc.), it penetrates to the muscle-tissue base, and then in this layer the layer of skin and subcutaneous tissue is separated from the substratum. The extent of mobilization is determined by the location of the operation and the advancedness of the preoperative findings. After that, the loose skin with the subcutaneous tissue is stretched, its excess is removed and all wounds are sutured. Active vacuum drains are inserted into the wound. Small excess skin or already present scars are adjusted so that the resulting scar is as aesthetically pleasing as possible. The result of the extent of the scars is always decided according to the actual condition during the operation, so that possible complications can be avoided as much as possible.

### **Postoperative care:**

On the first or second day after surgery, the doctor removes the drains through which the rest of the blood fluid drains. The patient goes home with compression garments on the lower limbs, during arm surgery, these are bandaged with an elastic bandage. On the lower limbs, the Client removes the elastic compression and gauze from the wound daily, leaving only plasters on the wound to treat the disinfection, then apply sterile gauze again and put on elastic underwear. On the upper limbs, these dressings are done in a similar way, but every other day and instead of compression clothes, the arms are tied with an elastic bandage.

After 14 days on the upper and lower limbs, the doctor will remove the compressions, gauze and plasters from the wound, and you can take a shower. Patients who cannot come to the dressing in person can remove the plasters from the wound themselves. The stitches are absorbable and do not need to be removed. If liposuction of the hips is performed at the same time, small stitches may remain on the skin, which are recommended to be removed after 14 days of the operation.

On the 18th day after surgery, it is recommended to start pressure massage of the scars. Finger pressure is applied to the scar for 30 seconds, then the finger is moved to another place on the scar. These massages are performed several times a day, and the use of scar cream is also suitable.

After the operation, the patient observes a rest regime for 14 days. For arm surgery, office work is possible a week after the surgery, with the arms still bandaged for a week. Full physical load of the upper limbs is possible after 4 weeks. For thigh surgery, office work is possible after 14 days. The compression garment is then worn continuously for the next 2 weeks, only being put aside for showering. Full physical activity is possible 4 weeks after the operation.

### **Notice:**

We are obliged to inform you that no surgical intervention in bodily integrity is completely without risk. No workplace or doctor can 100% guarantee an ideal and uncomplicated course of surgery and post-operative healing. Complications occur during and

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**Client's signature:**

after surgery in a certain, albeit small, percentage. Their occurrence cannot be objectively prevented and their occurrence cannot even be predicted. These are complications that arise even though care was provided properly, doctors and other medical personnel did not violate any of their duties, and health care was provided in accordance with the available knowledge of medical science. For that reason, it is essential that you are informed about them before the performance itself. Patients who do not follow the doctor's instructions have a higher risk of complications. It is also necessary to count on the need for repeated and more frequent checks at our workplace in the event of some complications, which can be difficult, especially if you live far away. Although the list of possible complications may seem too long at first glance, the probability of their occurrence is very small. We present them all in an effort to provide you with maximum information, because we believe that only a fully informed patient is able to make the right decision.

**General anesthesia enables** a safer performance of surgical procedures that cannot be performed under local anesthesia due to the location or extent of the procedure or its potential pain. An anesthetic administered intravenously or by inhalation is used, and it is often necessary to insert a breathing tube into the airways, so-called intubation. The vast majority of general anesthetics are completely uncomplicated, especially if the patient is otherwise healthy. However, with any anesthesia, complications can sometimes occur. These can also include worsening of your current illnesses. Temporary side effects of general anesthesia include drowsiness, headaches, vomiting, fatigue, confusion, dizziness, muscle pain (back, abdomen, etc.) or increased temperature. Less serious complications include inflammation, pain or bleeding at the site of venous entry, postoperative cough and sore throat, blurred or double vision, photophobia, injury or broken tooth during difficult intubation, injury or bruising of the tongue or lips, muscle tremors, inability to urinate, itching of the skin, allergic reactions to the anesthetics used, temporary loss of short-term memory or reduced blood pressure. The operation can also be postponed due to the impossibility of inserting an intubation tube into the airways, spasms of the airway muscles (laryngospasm, bronchospasm, liver damage, inflammation of the bronchi or lungs or blockage of the veins of the lower limbs, regaining consciousness during the operation, and injuries to joints or peripheral nerves during positioning and handling. The most serious complications, which rarely occur, include myocardial infarction, cardiac arrest, cerebrovascular accident, respiratory arrest, pulmonary embolism, aspiration of gastric contents, organ failure, malignant hyperthermia, severe allergic reaction to anaphylactic shock, device failure, visual impairment, and death. Complications of local anesthesia mainly include an allergic or toxic reaction to the anesthetic used. Its most common manifestation is a skin or mucosal rash, swelling and nausea. Severe cases are rare and may manifest as breathing disorders, a drop in blood pressure, convulsions and impaired consciousness and heart failure. Another complication can be injury to the nerve by the needle during the application of the anesthetic, especially if it is a convulsive anesthesia applied directly around the larger nerve trunks. The manifestation of this injury can be numbness or pain in the innervation zone of the nerve, which is mostly temporary, exceptionally permanent.

We divide the actual operative complications into general ones, which can occur during any operation, and complications specific to a specific type of operation. Common complications include bleeding in the surgical wound. Local bleeding will be manifested by bruising around it, which can prolong the healing time. Heavy bleeding may require immediate reoperation and revision of the surgical wound. The need for a blood transfusion and the emergence of a shock state due to blood loss cannot be ruled out. Another possible complication is an infection in the surgical wound. In milder cases, it is manifested by redness and swelling, sometimes antibiotics are necessary. In severe cases, the surgical wound may spread, necrosis (death) of surrounding tissues, or the appearance of a shock state. Infectious complications are more frequent and dangerous in patients who are carriers of antibiotic-resistant bacterial strains. Another possible complication is ischemia (lack of blood supply) of the tissues around the surgical wound, which leads to its disintegration and the death of part of the surrounding tissues. A gap (rupture) of a surgical wound can also occur when the body's defenses are impaired, due to mechanical violence (e.g. a fall), when the regimen prescribed by the doctor is not followed, or even without a detectable cause. Predisposed individuals may develop an allergic reaction to medications, disinfectants, or suture and bandage material. An allergic reaction is usually manifested by local redness, swelling and itching, but general allergic reactions associated with rash and swelling, respiratory and cardiac disturbances or the emergence of a shock state cannot be excluded. Every surgery leaves scars. Scars are usually not noticeable, but in predisposed people, the formation of hypertrophic scars or keloid scars, or atrophic (sunken scars) and stretched scars cannot be ruled out. Some scars can cause functional difficulties - itching, pain, limitation of joint movements, irritation of surrounding nerves. Rarely, a dermoid cyst can develop near the scar, i.e. a cyst filled with sebum and dead skin cells. The skin can also be injured during surgery with an electrocoagulator - a device used in hemorrhaging. General complications can also include poor psychological adaptation to the new appearance after aesthetic treatment. With any surgical procedure, the need for further surgical correction can never be completely ruled out in advance. The probability of postoperative interventions is higher in smokers. Among the specific complications of thigh and/or arm surgery are bleeding and infection, which are now minimized during the operation and in the postoperative course (absorbent bandages, administration of antibiotics). Since the extent of the scars during this operation is larger and it is an area stressed by movement, a reaction of the subcutaneous tissue to the internal absorbable suture material may occur, with subsequent spreading of part of the scar and temporary tissue secretion (usually 2-4 weeks after the operation). This complication has the result of both prolonging the healing of the scar by several weeks and sometimes even its expansion. After healing and stabilization of the scar, usually 6 months after surgery, correction of this part of the enlarged scar is possible.

This information certainly cannot be exhaustive. Therefore, please ask your attending physician or surgeon about everything that interests you in relation to the planned operation. Detailed information is also necessary to find out (a) what result

can be expected from the operation. Even the best performance cannot meet unrealistic expectations. We assure you that we will do everything to ensure that your operation takes place without complications

The above-mentioned complications may occur despite our best efforts to prevent them. The postoperative course is usually without complications, but it is not possible to guarantee 100% that it will not occur in you. However, most complications are solvable, and if they do occur, we will work together with you to cure them as quickly as possible and, if necessary, correct them if the aesthetic result of the operation is affected. In all cases, however, it does not apply that possible complications will always be healed without consequences.

PLEASE ASK ANYTHING YOU THINK IS IMPORTANT!

**The client is obliged to:**

Inform the attending physician-operator about all past and present illnesses, allergies and medications (especially medications that affect blood clotting and bleeding).

**Please bring:**

- The results of the pre-operative examination, which must not be older than 14 days, without presenting this examination you cannot be accepted for surgery
- Identity card and health insurance card
- Medications that you normally take - hand these medications to the inpatient nurse upon admission and they will be administered to you in such a way that they do not impair the effect of the medications administered in connection with the operation
- Toothbrush, toothpaste, cosmetics you use
- You will receive everything else (food, drinks, clothes, change of shoes, bathrobe, towel, etc.) from us

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

- Perform thorough personal hygiene in the evening and in the morning before the procedure
- On the expected day of release, arrange a ride with an escort, if this is not within your power, we will arrange a taxi ride for you.
- Shorten at least one nail (index or middle finger) on the non-dominant hand

**Please strictly follow the instructions before general anesthesia - see "Recommendations before general anesthesia" of the anesthesiologists. In case of any ambiguity or deviation in the result of the pre-operative examination, the Clinic, through the operating doctor or anesthetist, reserves the right to withdraw from the procedure, which is for aesthetic reasons, even on the day of the procedure. The performance can be delayed, if possible, until the patient's medical compensation.**

**Informed consent to surgery:**

The client confirms that he has informed the doctor accurately and completely about his state of health before the procedure and agrees to any other medical interventions and procedures that will be necessary in the event of complications to preserve his health. They agree that the described complications, if they occur, will not be considered as health damage caused by the described treatment, if the treatment is performed properly (lege artis). The client agrees to archive the necessary photo documentation for the needs of the operator and the Clinic.

**I have been informed and I agree with the necessity of a pre-operative examination depending on the type of procedure.**

In order to carry out the mentioned operation, **I agree to the proposed hospitalization.**

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

**At the same time, I confirm that in the event of unexpected complications,** requiring the immediate execution of other procedures necessary to save life or health, I agree to the execution of all other necessary and urgent procedures necessary to save my life and health, I also confirm that I agree to any submission blood transfusion. In the event that I do not have health insurance in the Czech Republic, I hereby agree from a medical point of view to the necessary measures in case of unexpected complications, such as, for example, further hospitalization in a specialized department and also to the full financial reimbursement of this hospitalization and other related procedures.

**I agree/I do not agree to the following persons being informed about my health status (name, surname, phone number, contact, relationship to the Client):**

.....

**I agree/I do not agree to the publication of the results of the procedure in the form of photo documentation for presentation or teaching purposes:**

- a) for internal use of the Clinic
- b) publication on the website

At the same time, the client gives his express 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 that they will always try to resolve any disputed matters by agreement. In the event that the contracting parties fail to resolve these matters by agreement, the Client and the Clinic agree that in the event of a dispute resolved by a court, the application of the Czech legal order and the jurisdiction of the Czech courts will be the competent court to resolve all disputes arising on the basis of this agreement or other contractual relationships between 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:**