



AMERICAN SOCIETY OF
PLASTIC SURGEONS®

Informed Consent

Mini-Abdominoplasty Surgery



INSTRUCTIONS

This document is about informed consent. It will tell you about mini-abdominoplasty surgery. It will outline the risks and other treatment options.

It is important that you read the whole document carefully. Please initial each page. Doing so means you have read the page. Signing the consent agreement means that you agree to the surgery that you have talked about with your plastic surgeon.

GENERAL INFORMATION

In a mini-abdominoplasty surgery, extra skin and fat from the lower belly is removed and the muscles in the abdomen are made tight. It is not the same as a full abdominoplasty, which is a bigger surgery. Abdominoplasty surgery is not a cure for being overweight. Overweight people who plan to lose weight should put off all body shaping surgeries till they reach a stable weight.

Plastic surgeons have different techniques for a mini-abdominoplasty. It can be done with other body shaping surgeries, like liposuction, or other elective surgeries.

ALTERNATIVE TREATMENTS

There are other ways to deal with loose skin and fat. You can choose not to have the surgery to fix where the loose skin and fat are. Liposuction is an option if you have good skin tone, the fat is in one place, and your weight is normal. A full abdominoplasty is also an option. Diet and exercise can help you lose weight and improve your shape. All surgeries have their own risks and possible problems.

RISKS OF MINI-ABDOMINOPLASTY SURGERY

Every surgery has risks. It is important that you understand the risks and the possible problems that can result from them. All procedures have limits. Choosing to have a surgery means comparing the risks and benefits. Most patients do not face problems, but you should talk about them with your plastic surgeon. Make sure you understand all possible outcomes of a mini-abdominoplasty.

SPECIFIC RISKS OF MINI-ABDOMINOPLASTY SURGERY

Change in Skin Sensation:

You may have less or no feeling in the skin after surgery. Reduced skin sensation may not come back after a mini-abdominoplasty.

Uneven Spots in the Skin:

You may see uneven spots, shapes, and dents in your skin after having a mini-abdominoplasty. You may also see and feel wrinkles in your skin. You may get uneven spots in the skin at the end of the cuts (called “dog ears”). Skin folds happen where there is extra skin. This may get better with time, or it can be fixed with surgery. When you have a mini-abdominoplasty, sometimes the lower part of the belly gets tighter than the upper part of the belly. This can make the upper belly look puffy and full. If you want to fix this, it may need another surgery. You may also need surgery if your lower abs do not look like what you want.

Belly Button/Navel:

Your belly button may be moved or appear out of shape. You may also lose your belly button.

Pubic Distortion:

In rare cases, women’s labia and pubic area can look different after surgery. If your pubic area looks very different, then you may need more treatment, like surgery.

**Platelet Gel or Fibrin Sealants (Tissue Glue):**

Platelet gel comes from your blood. Fibrin sealants come from the blood of other humans. This blood is heated up so that you cannot get a virus from it. Together they act like “tissue glue.” It holds tissues together and reduces the chance of bruising after surgery. Tissue glue comes from blood that is tested to make sure that it does not have hepatitis, syphilis, or human immunodeficiency virus (HIV).

Drains:

During your surgery, your doctor may need to put in a drain(s). A drain is a small tube that removes fluid from where you were operated on. You will be told how to use your drain. Putting the drain in may require a separate small cut. The drain will be taken out when your doctor feels you no longer need it. When the drain is taken out, your doctor may close the area where the drain was. You may need surgical tape or stitches. Your doctor may also leave the site open to drain any leftover fluid under the wound.

Possible Hernia Repair:

During the mini-abdominoplasty, your surgeon may see a hernia. A hernia can occur at the cut, groin, or near the belly button. It is best that your surgeon fixes the hernia during your mini-abdominoplasty, if possible.

Skin Loss:

After surgery, your skin may be thinner, and the tissue under the skin may die. In a mini-abdominoplasty, you may see skin loss below the belly button. Health issues and medications can make it hard for blood to flow to this part of the body. If your skin gets thinner or your tissue begins to die, then it is likely that you will need surgery to remove the damaged tissue and close the wound. Once you heal, you may need another surgery to improve how the area looks or works.

Scars:

All surgeries leave scars. Some scars are seen more clearly than others. Wounds are likely to heal after surgery, but can leave long, visible scars that will not go away. Unusual scars may occur in the skin and in the tissues below. Scars may look bad and be a different color than your other skin. The same scar may look different on the right and left side of your body. The stitches may leave a mark on your skin. These scars may be raised and red in the first few weeks or months. They usually fade over time. However, some patients can have “hypertrophic” or “keloid” scars, which means you can clearly see and feel them. They may be red, and they do not go away. You may need more treatments, like medication and/or surgery to fix this.

Injury to Deep Vital Structures:

After surgery, there is a risk of injuries to other organs and vital structures. These structures include the bowel or gut, muscles, nerves, blood vessels, and other parts of the body. Injuries to these parts can lead to severe infections, bleeding, breathing problems, organ failure, and even death. Treating such injuries may require more surgery or time in the hospital.



DISCLAIMER

Informed consent documents give you information about a surgery you are considering. These documents explain the risks of that surgery. They also discuss other treatment options, including not having surgery. However, informed consent documents can't cover everything. Your plastic surgeon may give you more or different information. This may be based on the facts of your case.

Informed consent documents are not meant to define or serve as the standard of medical care. Standards of medical care are determined based on the facts involved in an individual case. They may change with advances in science and technology. They can also change with the way doctors practice medicine.

It is important that you read the above information carefully and get all your questions answered before signing the consent agreement on the next page.



CONSENT FOR PROCEDURE OR TREATMENT

1. I permit Dr. Kristopher Hamwi and the doctor’s assistants to do the **Mini-Abdominoplasty Surgery**.
2. I got the information sheet on Mini-Abdominoplasty Surgery.
3. I understand that, during the surgery, an unexpected situation may require a different medical procedure than the surgery listed above. I permit the doctor listed above, the assistants and/or designees to provide any treatment that my doctor thinks is needed or helpful. My permission includes all treatments that my doctor does not plan to do at the start of the surgery.
4. I understand what my surgeon can and cannot do. I understand that no warranties or guarantees have been hinted at or stated outright about the outcome of the surgery. I have explained my goals. I understand which outcomes are realistic and which are not. All my questions have been answered. I understand the surgery’s risks. I am aware of other risks and possible issues, benefits, and options. I understand and choose to have the surgery.
5. I agree to the anesthetics that are needed or helpful. I understand that all types of anesthesia have risks and may result in complications, injury, and even death.
6. I am aware of the serious risks to my health when blood products are used. I agree to my doctor using them if my doctor, assistants, and/or designees think they are needed or helpful.
7. I agree to the disposal of any tissue, medical devices, or body parts taken out during or after surgery. I also agree to any additional surgeries or treatment that is needed or helpful.
8. I agree to have parts of my body photographed or televised appropriately before, during, and after the surgery for medical, scientific, or educational reasons, if the pictures do not reveal my identity.
9. For medical education, I agree that onlookers can be in the operating room.
10. I permit my Social Security Number to be given to the right agencies for legal reasons and medical device registration, when necessary.
11. I agree to the charges for this surgery. I understand that the doctor’s charges are separate from the charges for the hospital and the anesthesia. I understand that there may be more charges if more procedures or treatments are needed or helpful. I agree to those charges, if any.
12. I understand that not having the surgery is an option and that I can opt-out of having the surgery.
13. IT HAS BEEN EXPLAINED TO ME IN A WAY THAT I UNDERSTAND:
 - a. THE ABOVE SURGERY TO BE PERFORMED
 - b. THERE MAY BE OTHER SURGERIES OR TREATMENT OPTIONS
 - c. THERE ARE RISKS TO THE SURGERY

I CONSENT TO THE SURGERY AND THE ITEMS THAT ARE LISTED ABOVE (1-13).
 I UNDERSTAND THE EXPLANATION AND HAVE NO MORE QUESTIONS.

 Patient or Person Authorized to Sign for Patient Date/Time

 Witness Date/Time