

GENERAL SURGICAL RISKS

ABOUT RISKS

- We want you to understand fully the risks involved so that you can make an informed decision. Although complications are infrequent, all surgeries have some degree of risk. All of us at **Lawton Plastic Surgery** will use our expertise and knowledge to avoid complications in so far as we are able. If a complication does occur, we will use those same skills in an attempt to solve the problem quickly. The importance of having a highly qualified medical team and the use of a certified facility cannot be overstated.
- In general, the least serious problems occur more often and the more serious problems occur rarely. Most complications involve an extension of the recovery period rather than any permanent effect of your final result.

NORMAL SYMPTOMS

- **SWELLING AND BRUISING:** Moderate swelling and bruising are normal after any surgery. Severe swelling and bruising may indicate bleeding or possible infection.
- **DISCOMFORT AND PAIN:** Mild to moderate discomfort or pain is normal after any surgery. If the pain becomes severe and is not relieved by pain medication, please call us at 210-496-2639.
- **NUMBNESS:** Small sensory nerves to the skin surface are occasionally cut when the incision is made or interrupted by undermining of the skin during surgery. The sensation in those areas gradually returns—usually within 2 or 3 months as the nerve endings heal.
- **ITCHING:** Itching and occasional small shooting electrical sensations within the skin frequently occur as the nerve endings heal. These symptoms are common during the recovery period.
- **REDNESS OF SCARS:** All new scars are red, dark pink, or purple. Scars on the face usually fade within 3 to 6 months. Scars on the breasts or body may take a year or longer to fade completely.

COMMON RISKS

- **HEMATOMA:** Small collections of blood under the skin are usually allowed to absorb spontaneously. Larger hematomas may require aspiration, drainage, or even surgical removal to achieve the best results.
- **INFLAMMATION AND INFECTION:** A superficial infection may require antibiotic ointment. Deeper infections are treated with antibiotics. Development of an abscess usually requires drainage.
- **THICK, WIDE OR DEPRESSED SCARS:** Abnormal scars may occur even though we have used the most modern plastic surgery techniques. Some areas of the body scar more than others, and some people scar more than others do. Your own history of scarring should give you some indication of what you can expect.
- **WOUND SEPARATION OR DELAYED HEALING:** Any incisions, during the healing phase, may separate or heal unusually slow for a number of reasons. These include inflammation, infection, wound tension, decreased circulation, smoking or excess external pressure. If delayed healing occurs, the final outcome is usually not significantly affected, but secondary revision of the scar may be indicated.
- **SENSITIVITY OR ALLERGY TO DRESSINGS OR TAPE:** Occasionally, allergic or sensitivity reactions may occur from soaps, ointments, tape or sutures used during or after the surgery. Such problems are usual and are usually mild and easily treated. In extremely rare circumstances, allergic reactions can be severe and require aggressive treatment or even hospitalizations.

- **INCREASED RISK FOR SMOKERS:** Smokers have a greater chance of skin loss and poor healing because of decreased skin circulation. (See handout on Smoking).
- **INJURY TO DEEPER STRUCTURES:** Blood vessels, nerves and muscles may be injured during surgery. The incidence of such injuries is rare.

RARER COMPLICATIONS

- If they are severe, any of the problems mentioned under Common Risks may significantly delay healing or necessitate further surgical procedures.
- Medical complications such as pulmonary embolism, severe allergic reactions to medications, cardiac arrhythmias, heart attack and hyperthermia are rare, but serious and life-threatening problems. Having a board-certified anesthesiologist present at your surgery reduces the risk as much as possible. (Failure to disclose all pertinent medical data before surgery may cause serious problems for you and for the medical team during surgery).
- All Plastic Surgery treatments and operations are performed to improve a condition, a problem or appearance. While the procedures are performed with a very high probability of success, disappointments occur and results are not always acceptable to patients or the surgeon. Secondary procedures or treatments may be indicated. Rarely, problems may occur that are permanent.
- **POOR RESULTS:** Asymmetry, unhappiness with the results, poor healing, etc. may occur. Minimal differences are usually acceptable. Larger differences may require revisional surgery.

UNSATISFACTORY RESULT & NEED FOR REVISIONAL SURGERY

ANESTHESIA & OTHER INFORMATION

GENERAL ANESTHESIA

- When general anesthesia is used, you will be sound asleep and under the care of your anesthesia provider throughout the operation. Once you are settled on the operating table, you will be connected to several monitors and an intravenous catheter. A quick-acting sedative will be given through the intravenous tubing after you have breathed pure oxygen for a few minutes. Once you fall asleep, your anesthesia provider will usually slip an endotracheal tube through your mouth into your windpipe to guarantee that your breathing is unimpeded. An anesthetic gas that you will breathe and other medications that will be given through the intravenous catheter will keep you asleep and pain free.
- Many patients have an instinctive fear of general anesthesia. Extremely sensitive monitors used during surgery have greatly reduced the risks of anesthesia. A minute change in oxygen level in your blood, in the amount of carbon dioxide you breathe out, in the percentage of anesthetic gas being administered, in your heart rate, or in your blood pressure would be reported immediately. Most complications of anesthesia in the past have occurred because of "simple" problems that were not recognized quickly enough. The sophisticated monitoring now used makes recognition of problems with anesthesia almost immediate.
- The anesthesia provider spends all of his or her time during the procedure ensuring your safety. Any significant changes in blood pressure, heart rate, or other vital functions are treated immediately.
- The current level of sophistication of anesthesia monitoring equipment makes general anesthesia much safer than in the past. The anesthesia and monitoring equipment is routinely maintained and is of the same quality as the equipment in any major hospital. Your anesthesia provider will discuss the specific risks of general anesthesia with you before your surgery.

MEDICATIONS

GENERAL INFORMATION

- The doctor and the nursing staff have given you prescriptions for your comfort and care. It is important that you use the medications as directed unless you experience abnormal symptoms that might be related to medication usage.

Symptoms such as itching, development of a rash, wheezing, and tightness in the throat would probably be due to an allergy. Should these occur, discontinue all medications and call the office for instructions.

NARCOTICS POLICY:

Due to new regulations, this office cannot phone in narcotic prescriptions (pain medication)

Please check your prescription to be sure you have enough pain pills to get you through the weekend. If not, please call our office Monday-Friday during regular business hours 9:00 AM to 5:00 PM in order to obtain your doctor's approval and to allow enough time to prepare a written prescription.

INSTRUCTIONS

- You will receive specific instructions from your discharge nurse regarding medications to take following your surgery. Please follow the instructions exactly, and call the office at 210-496-2639 if you have any questions.
- **CONSTIPATION:** Constipation is common following surgery, especially with the use of narcotic pain medicines. If you are prone to constipation, make sure you **Speak with your nurse** before your surgery so that she can address this with you. We may recommend you take a non-stimulant product designed to treat this. You have a handout in this packet which addresses other options as well.