

## **SUMMARY OF INFORMATION DISCUSSED AND UNDERSTOOD**

This document is a list of the potential limits and adverse effects of the treatments that you may be considering including the implications both to your personal health and in terms of lost time, costs and attendance for further treatment.

Please note that by necessity it covers a wide range of complications, but that serious complications are uncommon or rare. Please ensure that you understand aspects that relate to your treatment before signing and undergoing your treatment. If you have any questions or concerns, contact Mr Saeed's secretary to arrange clarification by phone or further consultation – Mr Saeed is happy to do this and encourages you to do this.

### **General aspects and areas discussed:**

General advice on health and well-being including advice on smoking, alcohol consumption, UV exposure and risks, exercise and healthy eating.

General medical advice if applicable re; other health conditions such as cardiorespiratory conditions, hypertension, diabetes, and advice on psychological / social aspects of a condition to the limits of MR Saeed's experience and training. Advice to arrange / referral to other health professionals as required.

Use of photo / video images, diagrams and available literature during consultation as applicable.

The treatment options available including no treatment, non-surgical treatment options and weight loss if applicable.

Risk of anaesthesia to the limits of Mr Saeed's experience – further clarification with anaesthetists is recommended in some circumstances, heart attack, other cardiac risks and implications.

Respiratory risks inc. retention of secretions, lung collapse, pneumonia and implications.

Deep venous thrombosis, pulmonary embolus (clots in leg veins that can pass to the lungs). Risks for given patient, use of TEDS, Flowtrons, early mobilisation and anticoagulants. Risks related to oral contraceptive/hormone replacement therapy, intercurrent disease or clotting abnormality. Unknown risks of oral anti-bruising agents eg arnica. Risks of concurrent medication eg aspirin.

### **General complication risks applicable to most procedures:**

Bleeding and/or haematoma formation and action to be taken, infection and wound breakdown and implications including antibiotic treatment, debridement/drainage.

Bone and joint infection if applicable and implications if relevant including loss of correction / symmetry / disfigurement.

Need for further operations including skin grafts / other reconstructive work, prolonged healing times, repeat dressings and attendance. Adverse effect on scarring.

Skin/soft tissue loss or damage eg perforation /splitting of skin.

Adverse scarring including hypertrophic, hypotrophic, keloid, tethered, pigmented, red scars. Treatment of scars and limits to treatment of scars.

Nerve damage and implications for sensory and motor nerves including pain, paraesthesia (abnormal sensation), loss of functional sensation, movement or autonomic function, need for physical therapy, splints, further surgical procedures.

The limited results of expert microsurgical repair on very small nerve branches. Lack of feasibility for repair of smaller nerve branches.

Wound dehiscence and implications including further surgical procedures and effects on scarring.

Asymmetry including incorrigible asymmetry eg due to pre-existing asymmetry.

Prolonged hospital stay in the event of any of the above with loss of time, earnings and cost implications.

### **Importance of aftercare and the need to keep all follow-up appointments:**

Gentle activity until tissues strong enough to support normal activity (see specifics below)

Wearing of appropriate aftercare garments / splints as instructed, non-interference with dressings unless instructed to or complications arise, keeping wounds/dressings dry as instructed. Protecting surgical sites from sources of infection / infective environments / activities that could lead to infection. Scar care advice including



massage with non-allergenic lotion / ointment as appropriate and avoidance of UV exposure for 12 months. Duration of this ie at least 12 months. Avoidance of 'scar reducing' agents eg Bio-Oil or Arnica due to undocumented effects on scars. Use of ice-packs if applicable and need to protect skin from cold damage. Taking of medications as instructed. Importance of timely contact with Mr Saeed / his team in the event of complications. Cost implications of further treatment if complications arise / out of failure to comply with post-operative instructions.

**Expected effects of treatments:**

Swelling, bruising (both may track to areas remote from the surgical site) skin redness, fluid collection beneath the elevated tissues, temporary numbness, hypersensitivity, stiffness, paraesthesia and the implications and management of these.

**Breast reduction and breast lift (in addition to the above):**

The procedure and the expected outcome, the position of the scars, the quality of the expected scars. The possibility of the permanent loss of nipple / areolar / breast sensation. Prolonged healing, fat necrosis, nipple / areolar loss. Post-operative care wound, scar and sun care. The risk of irregularity, shape deformity, asymmetry, worsening of natural asymmetry Need for strict adherence to gentle activity for 4 weeks minimum after procedure. Skin discoloration or pigmentation may be permanent.

This surgery makes no guarantee against the effects of natural ageing on the appearance and position of the breasts, the effects of weight fluctuations, lifestyle and pregnancy on the breasts or the possibility of recurrent breast growth and /or drop.

**Breast enlargement or adjustment of breast or breast and chest implants:**

The operation and current advice and safety profile of silicone. Saline alternative, non-implant alternatives. Expected outcome based on consultation, patients wish, clinical limitations and use of trial implants in clinic, no guarantee about final size. The nature of the various implants that are available as well as the current issues including screening for breast cancer / associated conditions. The site of the scars. Infection, which could necessitate re-operation or the removal of the implants. Capsular contracture, and the implications of this as well as implant life span, permanent sensory loss, asymmetry, malposition, ptosis, wrinkles, knuckles and stretch marks, temporary outcomes such as swelling, discomfort and sensory loss in the elevated breast (usually for a period of up to six weeks) as well as the more permanent sensory loss in the small areas around the scars. Recovery time, the expected course of the recovery. Need for strict adherence to gentle activity for 4 weeks minimum. Long term cost implications including potential need for further surgery.

Association of breast implants with anaplastic large cell lymphoma (ALCL). This is extremely rare – out of an estimated 5-10 million women, by 2016 there were 14 cases in total.

The possibility of the permanent loss of nipple / areolar / breast sensation. Prolonged healing, fat necrosis, nipple / areolar loss. Need for strict adherence to gentle activity for 4 weeks minimum after procedure or as instructed for longer periods.

**Limits of treatment:**

The limitations of a given procedure including the anatomical area affected by the treatment and areas that will not be significantly affected. The time taken for the effects of treatment to become apparent. The limitations and possible incompleteness of such effects. Other treatment options available including those involving a different specialty.

The need for revisions and adjustments.

**SECONDARY OR SUBSEQUENT SURGERY:**

**Secondary surgery (revision) aims to improve the situation and a full correction should not be expected. It can also be subject to complications and the need for revision. Scarring may be improved but there is a possibility it may be worse, and this also applies to deformity and function. This is particularly so if complications occur.**

Declaration:

The information above has been clearly explained to me by Mr Waseem Saeed and I fully understand it and the choices given to me, particularly benefits, limits, aftercare, risks and the implications of all of these.

Signed:

Date:

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PATIENT

Name (BLOCK CAPITALS)



**WASEEM SAEED**