



Informed Consent

Lateral Thigh Lift Surgery



**INSTRUCTIONS**

This is an informed consent document to help you learn more about lateral thigh lift. You'll learn about the surgery, its risks, and other treatment(s) you might choose.

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

A lateral thigh lift is a type of surgery to remove extra skin and fat tissue from outer thighs and hips. A thigh lift is not a fix for being overweight. If you are obese and plan to lose weight, you should put off surgery that will change your body shape until you have reached a stable weight.

RISKS OF THIGH LIFT SURGERY

Every surgery has risks. It is important that you understand the risks and the possible problems. All procedures have limits. Choosing to have 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 your thigh lift surgery.

SPECIFIC RISKS OF THIGH LIFT SURGERY**Delayed Healing:**

Some areas of your sides, back, or buttocks may not heal normally. They may take a long time to heal. Some of your skin may die or peel off. If this happens, you may need frequent bandage changing or more surgeries to remove tissue that isn't healing. If you have less blood supply to parts of your body from past surgeries or radiation therapy, you may be at greater risk for trouble healing. Your surgery results may not be as good. Smokers have a greater risk of skin loss and trouble healing.

Skin Discoloration/Swelling:

It's normal to see some bruising and swelling after surgery. The skin near the surgical site may look either lighter or darker than the rest of the skin. Although it is rare, swelling and changes to your skin color may last for a long time. In rare situations, this may be permanent.

Pain:

You will have pain after surgery. The pain you feel after surgery may vary in how strong it is and how long it lasts. Some people have continued pain. This may happen if some nerves are stuck in the scar tissue after surgery (neuromas) or to the tissue stretches.

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.

Seromas (Fluid Build-Up):

In rare cases, fluid may build up between your skin and the tissue below it after the surgery, trauma, or heavy exercise. If this occurs, it may need to be drained. To solve this problem, doctors usually put in a drain.

Drains:

During your surgery, your doctor will put in drains. A drain is a small tube that removes fluid away from the surgery site. You will be told how to use your drain. Putting the drain may require a small separate cut. The drain will be taken out when your doctor feels you don't need it anymore. When the drain site is taken out, your doctor may close the drain area with special tape or stitches. Your doctor may also leave the site open to drain any leftover fluid under the wound.

Re-Loosening of Skin:

Almost all patients who have a body lift will see their skin begin to loosen with time. This is due to your body stretching and moving. Patients who have lost a lot of weight are at a higher risk of having their skin loosen again. No matter how tight your surgeon makes your skin during surgery, it will loosen with time. Everyone's skin loosens differently.

Change in Sensation:

It is common for your sense of touch in the areas where you've had surgery to change slightly. Most often, patients will have less sensation or loss of skin sensation in the surgery area. Your sense of touch will usually come back; it is rare to have permanent changes in sensation. However, reduced or lost skin sensation may not completely return after surgery. There is a very small risk of motor nerve injury, which may result in having trouble with how your legs and lower body work.

Skin Contour Irregularities:

After surgery, you may notice changes to the shape of your skin. You may see or feel wrinkles. The skin at the ends of any cuts or "dog ears" may change if there is extra skin. Such skin folds may get better with time, or it can be fixed with surgery.

Asymmetry:

You may not have a perfectly even (symmetrical) body after surgery. It's normal for the left and right sides of your body to be slightly different, due to your unique skin tone, fat deposits, bone structure, and muscle tone. Most patients have visible differences between the right and left side of their bodies even before surgery. Reducing these differences may require more surgery.

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. Matthew C Camp and the doctor’s assistants to do the **Lateral Thigh Lift Surgery**.
2. I got the information sheet on Lateral Thigh Lift 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 as listed on my estimate sheet. 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

Matthew C Camp, MD Date/Time