

**Dr. James B. Lowe – Plastic Surgery**  
**TUMMY TUCK COMBINED WITH OTHER SURGERY INFORMATION**  
**AND INFORMED CONSENT**

**Instructions**

This is an informed consent document that has been prepared to assist your plastic surgeon to inform you concerning tummy tuck when combined with other surgeries or procedures, its risks, and alternative treatment.

*It is important that you read this information carefully and completely. Please initial each page, indicating that you have read the page and sign the consent for surgery as proposed by your plastic surgeon.*

**INTRODUCTION**

Tummy tucks are a type of body contouring operation frequently performed by plastic surgeons. Body contouring procedures involve operations that change the general shape of a patient's body: pannus removal (panniculectomy), tummy tuck (abdominoplasty), buttock lift, thigh lift, arm lift, and liposuction. These procedures are performed for a variety of reason such as massive weight loss, skin excess, or local fat deposits. A cosmetic procedure such as a tummy tuck not only addresses the abdominal fat but also tightens the abdominal wall and removes a great deal of excess skin. Cosmetic surgery procedures such as a tummy tuck, liposuction, or other body lifts are not covered by your insurance.

Tummy tucks are often combined with other procedures to enhance overall appearance or to improve function. Most patients undergoing tummy tucks also undergo flank liposuction which is a standard combination procedure performed. Many patients have other areas of their body such as the thighs, calves, knees, arms, back or neck liposuctioned along with their tummy tucks. Patients may elect to have their love handles removed (flankplasty) as part of a combination procedure. These combination procedures are cosmetic, but a tummy tuck can be combined with other insurance covered procedures in many cases.

Tummy tucks are often combined with breast reduction surgery. This allows for a better overall shape particularly in women with certain body shapes or skin redundancy. It is not unusual to combine a tummy tuck with other medically indicated procedures such as hysterectomy. The general rule should be that the cosmetic tummy tuck should be less lengthy than the insurance covered procedure. Combining medical procedures with tummy tucks increases the time in the operating room and the risks of the surgery.

Some medically indicated procedures should not be performed with a tummy tuck procedures and some patients may not be a candidate for combination surgery. It is important to note that the contraindications for a tummy tuck alone should be applied to combination procedures as well. It is never a good idea to have a tummy tuck just because you are already in the operating room. Your plastic surgeon will review the risks and potential complications of combination procedures as well as the complexities of insurance coverage and re-imburement. If another surgeon is involved in the combined surgery, it is the patient's responsibility to review the risks of the combination surgery with that surgeon as well.

Patients choose to combine tummy tucks with other procedures for a variety of reasons. Patients often desire combination procedures to maximize their recovery periods and limit time-off from work. In many cases, combining procedures decrease the expense of the tummy tuck portion of the surgery because secondary procedures can be performed more efficiently. These benefits are the primary reasons patients may choose to accept the increase medical risks of combination procedures. Each individual must carefully weigh the pros and cons of combination surgery before proceeding with surgery.

The best candidates for tummy tuck surgery are individuals who are looking for improvement, not perfection, in the appearance of their body. These procedures are not performed as a weight loss program, but can help jump start a healthy life style. Many areas of fat and skin excess are resistant to diet and exercise and will respond best to surgical treatments. It is important to note that body contouring procedures such as tummy tucks are not without risks. There is almost always a trade off with these procedures such as scarring, contour irregularities, and numbness that is often permanent. Realistic expectations, good health, and psychological stability are important qualities for a patient considering tummy tuck procedures. Dr. Lowe will do his best to explain the procedures that work the best for you.

### **ALTERNATIVE TREATMENT**

Alternative forms of management consist of not undergoing the tummy tuck and combination surgery. These procedures may improve body contour but often leave visible scars. Risks and potential complications associated with alternative forms of treatment should be discussed with Dr. Lowe as well.

### **RISKS OF BODY CONTOURING SURGERY**

With any type of activity there is inherent risk. An individual's choice to undergo a surgical procedure is based on the comparison of the risk to potential benefit. Although the majority of patients do not experience the following complications, you should discuss each of them with your plastic surgeon to make sure you understand the risks, potential complications, and consequences of tummy tuck and combined surgery.

**Bleeding** – It is possible, though unusual, that you may have problems with bleeding during or after surgery. Should postoperative bleeding occur, it may require emergency treatment to stop the bleeding or a trip back to the operating room. Certain body contouring procedures such as extended abdominoplasties (tummy tucks that goes around the back) or massive panniculectomies are more prone to bleeding. When a large amount of tissue is removed particularly when procedures are combined there may be a need for blood transfusion. Do not take any aspirin or anti-inflammatory medications for ten days before surgery, as this contributes to a greater risk of bleeding. Hypertension (high blood pressure) that is not under good medical control may cause bleeding during or after surgery. Accumulations of blood under the skin may delay healing and cause scarring.

**Fluid collections** – Fluid collections can form in the period following combined procedures. These collections are called seromas and may be prevented by the use of compression dressings or drains. If the patient develops a fluid collection it may require multiple tapping, medical treatment, a new drain, or a trip back to the operating room.

**Infection** – Infection is quite unusual after most tummy tuck surgery. Should an infection occur, additional treatment including antibiotics may be necessary. Infection can cause surgical wound to open and result in scarring. Infection is not uncommon in patients undergoing large pannus or skin removals. Combining a tummy tuck with more complicated operations such as hysterectomies will substantially increase the risk of wound infections. This relates to the fact that entering the abdomen and female track increases the exposure to bacteria.

**Scarring** – Although good wound healing after a surgery is expected, abnormal scars may occur both within the skin and deeper tissues. Scars may be unattractive and of different color than surrounding skin. There is the possibility of visible marks from sutures. Additional treatments including surgery may be needed to treat scarring.

**Scar length** – The length of your scars following tummy tuck combined with other surgery is related to the area of redundancy. Limiting the scars will often limit the success of the surgery by accentuating other deformities. A good example of this is seen with abdominoplasty procedures. If redundancy is present in the flanks prior to a tummy tuck it will only be made worse by removing skin in the front. Sometimes this problem can be addressed with liposuction alone, but it may be better to extend the scar to the flanks to address significant tissue redundancy.

**Skin compromise** – Certain combined procedures require significant undermining such as abdominoplasty or thigh lifts can be associated with separation of the wound. This wound separation will require local wound care and scar revision. Wound separation may be the result of skin death or infection and certain areas are more prone to this problem than others (i.e. belly button, lower abdomen, and inner thighs). Liposuction can result in skin compromise but it is very rare. Smoking will compromise the skin so patients can not smoke for 2 months prior to surgery and at least one month after surgery. Avoid the sun for 6 months after surgery.

**Damage to deeper structures** – Deeper structures such as nerves, blood vessels, and muscles may be damaged during the course of surgery. The potential for this to occur varies with the type of body contouring procedure. Injury to deeper structures may be temporary or permanent. Liposuction is often associated with post operative pain or numbness which usually resolves within several months. Any procedure requiring a great deal of skin or soft tissue removal will result in numbness and pain.

**Unsatisfactory result** – There is the possibility of an unsatisfactory result from the combined procedure. The surgery may result in unacceptable visible or tactile deformities, loss of function, or structural mal-position. You may be disappointed that the results of surgery do not meet your expectations. Additional surgery may be necessary should the result be unsatisfactory.

**Numbness** – There is the potential for permanent numbness following combined procedures. The occurrence of this is not predictable. It is rare to have numbness past 6 months, but numbness may not totally resolve in some cases. As nerves recover they may become hypersensitive or even painful.

**Asymmetry** – The human body is normally asymmetrical. There can be a variation from one side to the other in the results obtained body contouring. If a surgical scar is required it is unlikely to ever be completely symmetric.

**Chronic pain** – Chronic pain may occur very infrequently after tummy tuck combined with other procedures.

**Skin irregularity** – Skin irregularities, bumps, and areas of stiffness usually occur after combined procedures. Most of these areas resolve with time but some irregularities may be permanent or require revision. External massage techniques may be helpful in some situations.

**Allergic reactions** – In rare cases, local allergies to tape, suture material, or topical preparations have been reported. Systemic reactions which are more serious may occur to drugs and prescription medicines. Allergic reactions may require additional treatment.

**Delayed healing** – Wound disruption or delayed wound healing is possible. Some areas of the abdomen may not heal normally and may take a long time to heal. Skin compromise may require frequent dressing changes or further surgery to remove the non-healed tissue.

**Long term effects** – It is important to remember to avoid sun exposure for 6 months after tummy tuck with other combined procedures. Sun tanning can result in tissue loss and scarring even when a bathing suit covers the area. Scars tend to fade with time but will be significantly harmed by sun exposure. Patients should try their best to lose as much weight as possible before surgery to maximize the result. Large weight gains after surgery will result in significant deformity in some cases. Future surgery or other treatments may be necessary to maintain the results of body contouring procedures.

**Need for revision** – Certain combined procedures are more likely to require revision surgery. Patients with a great deal of tissue or skin excess often require a second operation at one year. It is only possible to remove and tighten tissue a certain amount on one occasion. Skin will often accommodate stretch over time and become redundant. Revision surgery is common in patients who have lost a lot of weight following gastric bypass or stapling. Patient's skin does not always retract well following liposuction procedures and redundancy may result requiring skin excision.

**Functional alterations** – Changes may occur after combined procedures that may limit a patient's function. Often tightening the abdominal wall may result in difficulty standing fully erect for a limited period of time. Patients may recovery at different rates following combined surgery, but the more surgery you have done the more difficult the recovery. Typically, patients are able to return to work 2 weeks after a tummy tuck and at 3-4 weeks following an extended abdominoplasty. Patients who are planning a future pregnancy should consider not undergoing certain body contouring procedures on the abdomen.

**Surgical anesthesia** – Both local and general anesthesia involve risk. There is the possibility of complications, injury, and even death from all forms of surgical anesthesia or sedation. If you are over 45 years of age, have a known medical condition, or you are in any way concerned, a pre-operative evaluation from your primary care physician or cardiologist is recommended prior to surgery.

**Deep Venous Thrombosis, Cardiac and Pulmonary Complications-** Surgery, especially longer procedures, may be associated with the formation of, or increase in, blood clots in the venous system. Pulmonary complications may occur secondarily to both blood clots (pulmonary emboli), fat deposits (fat emboli) or partial collapse of the lungs after general anesthesia. Pulmonary and fat emboli can be life-threatening or fatal in some circumstances. Air travel, inactivity and other conditions may increase the incidence of blood clots traveling to the lungs causing a major blood clot that may result in death. It is important to discuss with your physician any past history of blood clots, swollen legs or the use of estrogen or birth control pills that may contribute to this condition. Cardiac complications are a risk with any surgery and anesthesia, even in patients without symptoms. Should any of these complications occur, you may require hospitalization and additional treatment. If you experience shortness of breath, chest pains, or unusual heart beats, seek medical attention immediately.

## **ADDITIONAL ADVISORIES**

**Long-Term Results-** Subsequent alterations in the appearance of your body may occur as the result of aging, sun exposure, weight loss, weight gain, pregnancy, menopause or other circumstances not related to your surgery.

**Metabolic Status of Massive Weight Loss Patients-** Your personal metabolic status of blood chemistry and protein levels may be abnormal following massive weight loss and surgical procedures to make a patient loose weight. Individuals with abnormalities may be a risk for serious medical and surgical complications, including delayed wound healing, infection or even in rare cases, death.

**Body-Piercing Procedures-** Individuals who currently wear body-piercing jewelry or are seeking to undergo body-piercing procedures must consider the possibility that an infection could develop anytime following this procedure. Treatment including antibiotics, hospitalization or additional surgery may be necessary.

**Female Patient Information-** It is important to inform your plastic surgeon if you use birth control pills, estrogen replacement, or if you suspect you may be pregnant. Many medications including antibiotics may neutralize the preventive effect of birth control pills, allowing for conception and pregnancy.

**Intimate Relations After Surgery-** Surgery involves coagulating of blood vessels and increased activity of any kind may open these vessels leading to a bleed, or hematoma. Increased activity that increased your pulse or heart rate may cause additional bruising, swelling, and the need for return to surgery and control bleeding. It is wise to refrain from sexual activity until your physician states it is safe.

**Medications-** There are many adverse reactions that occur as the result of taking over-the-counter, herbal, and/or prescription medications. Be sure to check with your physician about any drug interactions that may exist with medications that you are already taking. If you have an adverse reaction, stop the drugs immediately and call your plastic surgeon for further instructions. If the reaction is severe, go immediately to the nearest emergency room. When taking the prescribed pain medications after surgery, realize that they can affect your thought process and coordination. Do not drive, do not operate complex equipment, do not make any important decisions and do not drink any alcohol while taking these medications. Be sure to take your prescribed medication only as directed.

**Mental Health Disorders and Elective Surgery-** It is important that all patients seeking to undergo elective surgery have realistic expectations that focus on improvement rather than perfection. Complications or less than satisfactory results are sometimes unavoidable, may require additional surgery and often are stressful. Please openly discuss with your surgeon, prior to surgery, any history that you may have of significant emotional depression or mental health disorders. Although many individuals may benefit psychologically from the results of elective surgery, effects on mental health cannot be accurately predicted.

**Smoking, Second-Hand Smoke Exposure, Nicotine Products (Patch, Gum, Nasal Spray)-**

Patients who are currently smoking, use tobacco products, or nicotine products (patch, gum, or nasal spray) are at a greater risk for significant surgical complications of skin dying, delayed healing, and additional scarring. Individuals exposed to second-hand smoke are also at potential risk for similar complications attributable to nicotine exposure. Additionally, smokers may have a significant negative effect on anesthesia and recovery from anesthesia, with coughing and possibly increased bleeding. Individuals who are not exposed to tobacco smoke or nicotine-containing products have a significantly lower risk of this type of complication. Please indicate your current status regarding these items below:

\_\_\_\_\_ I am a non-smoker and do not use nicotine products. I understand the risk of second-hand smoke exposure causing surgical complications.

\_\_\_\_\_ I am a smoker or use tobacco / nicotine products. I understand the risk of surgical complications due to smoking or use of nicotine products.

It is important to refrain from smoking at least 6 weeks before surgery and until your physician states it is safe to return, if desired.

**Post-bariatric patients:** It is highly recommended that you quit smoking before undergoing this procedure as it will adversely affect your outcome. Only under certain circumstances, clearly specified by your plastic surgeon, should this procedure be done on an individual who smokes.

### **ADDITIONAL SURGERY NECESSARY (Re-operations)**

There are many variable conditions that may influence the long-term result of surgery. Should complications occur, additional surgery or other treatments may be necessary. Secondary surgery may be necessary to obtain optimal results. Even though risks and complications occur infrequently, the risks cited are particularly associated with abdominoplasty. Other complications and risks can occur but are even more uncommon. The practice of medicine and surgery is not an exact science. Although good results are expected, there is no guarantee or warranty expressed or implied, on the results that may be obtained. In some situations, it may not be possible to achieve optimal results with a single surgical procedure.

### **PATIENT COMPLIANCE**

Follow all physician instructions carefully; this is essential for the success of your outcome. It is important that the surgical incisions are not subjected to excessive force, swelling, abrasion, or motion during the time of healing. Personal and vocational activity needs to be restricted. Protective dressings and drains should not be removed unless instructed by your plastic surgeon. Successful post-operative function depends on both surgery and subsequent care. Physical activity that increases your pulse or heart rate may cause bruising, swelling, fluid accumulation and the need for return to surgery. It is wise to refrain from intimate physical activities after surgery until your physician states it is safe. It is important that you participate in follow-up care, return for aftercare, and promote your recovery after surgery.

### **FINANCIAL RESPONSIBILITIES**

The cost of surgery involves several charges for the services provided. The total includes fees charged by your surgeon, the cost of surgical supplies, anesthesia, laboratory tests, and possible outpatient hospital charges, depending on where the surgery is performed. Depending on whether the cost of surgery is covered by an insurance plan, you will be responsible for necessary co-payments, deductibles, and charges not covered. The fees charged for this procedure do not include any potential future costs for additional procedures that you elect to have or require in order to revise, optimize, or complete your outcome. Additional costs may occur should complications develop from the surgery. Secondary surgery or hospital day-surgery charges involved with revision surgery will also be your responsibility. **In signing the consent for this surgery/procedure, you acknowledge that you have been informed about its risk and consequences and accept responsibility for the clinical decisions that were made along with the financial costs of all future treatments.**

### **HEALTH INSURANCE**

Most health insurance companies exclude coverage for cosmetic surgical operations such as abdominoplasty or any complications that might occur from surgery. Please carefully review your health insurance subscriber-information pamphlet or contact your insurance company for a detailed explanation of their policies for covering abdominoplasty procedures. **Most insurance plans exclude coverage for secondary or revisionary surgery.**

### **DISCLAIMER**

Informed-consent documents are used to communicate information about the proposed surgical treatment of a disease or condition along with disclosure of risks and alternative forms of treatment(s). This

informed –consent process attempts to define principles of risk disclosure that should generally meet the needs of most patients in most circumstances.

However, informed consent documents should not be considered all inclusive in defining other methods of care and risks encountered. Your plastic surgeon may provide you with additional or different information which is based on all the facts in your particular case and the state of medical knowledge.

Informed-consent documents are not intended to define or serve as the standard of medical care. Standards of medical care are determined on the basis of all of the facts involved in an individual case and are subject to change as scientific knowledge and technology advance and as practice patterns evolve.

**It is important that you read the above information carefully and have all of your questions answered before signing the consent below.**

**CONSENT FOR SURGERY/PROCEDURE or TREATMENT**

1. I hereby authorize Dr. Lowe and such assistants as may be selected to perform the following procedure or treatment.

\_\_\_\_\_

I have received the following information sheet:

**INFORMED CONSENT FOR TUMMY TUCK COMBINED WITH OTHER SURGERY**

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2. I recognize that during the course of the operations and medical treatment or anesthesia, unforeseen conditions may necessitate different procedures than those above. I, therefore, authorize the above physician and assistants or designees to perform such other procedures that are in the exercise of his or her professional judgment necessary and desirable. The authority granted under this paragraph shall include all conditions that require treatment and are not known to my physician at the time the procedure is begun.
3. I consent to the administration of such anesthetics considered necessary or advisable. I understand that all forms of anesthesia involve risk and the possibility of complications, injury, and sometimes death.
4. I acknowledge that no guarantee has been given by anyone as to the results that may be obtained.
5. I consent to the photographing or televising of the operation(s) or procedure(s) to be performed, including appropriate portions of my body, for medical, scientific or educational purposes, provided my identity is not revealed by the pictures.
6. For purposes of advancing medical education, I consent to the admittance of observers to the operating room.
7. I consent to the disposal of any tissue, medical devices or body parts which may be removed.
8. I authorize the release of my Social Security number to appropriate agencies for legal reporting and medical-device registration, if applicable.
9. **IT HAS BEEN EXPLAINED TO ME IN A WAY THAT I UNDERSTAND:**
- A. The above treatment or procedure to be undertaken.
  - B. There may be alternative procedures or methods of treatment.
  - C. There are risks to the procedure or treatment proposed including those listed above.
  - D. I have read, understood, and have had the opportunity to ask questions concerning the above, as well as the Informed Consent Body Contouring Surgery information sheet.
  - E. I am satisfied with the explanation.

I CONSENT TO THE TREATMENT OR PROCEDURE AND THE ABOVE LISTED ITEMS (1-9).

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Patient or Person Authorized To Sign for Patient.

\_\_\_\_\_

Date

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Witness