

Patient's Name: _____
Date of Surgery: _____

Patient Educational Information: Provided by
American Society of Plastic Surgeons

BLEPHAROPLASTY

Eyelid surgery (technically called blepharoplasty) is a procedure to remove fat--usually along with excess skin and muscle from the upper and lower eyelids. Eyelid surgery can correct drooping upper lids and puffy bags below your eyes - features that make you look older and more tired than you feel, and may even interfere with your vision. However, it won't remove crow's feet or other wrinkles, eliminate dark circles under your eyes, or lift sagging eyebrows. While it can add an upper eyelid crease to Asian eyes, it will not erase evidence of your ethnic or racial heritage. Blepharoplasty can be done alone, or in conjunction with other facial surgery procedures such as a facelift or browlift.

If you're considering eyelid surgery, this information will give you a basic understanding of the procedure--when it can help, how it's performed, and what results you can expect. It can't answer all of your questions, since a lot depends on the individual patient and the surgeon. Please ask your surgeon about anything you don't understand.

THE BEST CANDIDATES FOR EYELID SURGERY

Blepharoplasty can enhance your appearance and your self-confidence, but it won't necessarily change your looks to match your ideal, or cause other people to treat you differently. Before you decide to have surgery, think carefully about your expectations and discuss them with your surgeon.

The best candidates for eyelid surgery are men and women who are physically healthy, psychologically stable, and realistic in their expectations. Most are 35 or older, but if droopy, baggy eyelids run in your family, you may decide to have eyelid surgery at a younger age.

A few medical conditions make blepharoplasty more risky. They include thyroid problems such as hypothyroidism and Graves' disease, dry eye or lack of sufficient tears, high blood pressure or other circulatory disorders, cardiovascular disease, and diabetes. A detached retina or glaucoma is also reason for caution; check with your ophthalmologist before you have surgery.

ALL SURGERY CARRIES SOME UNCERTAINTY AND RISK

When eyelid surgery is performed by a qualified plastic surgeon, complications are infrequent and usually minor.

Nevertheless, there is always a possibility of complications, including infection or a reaction to the anesthesia. You can reduce your risks by closely following your surgeon's instructions both before and after surgery.

The minor complications that occasionally follow blepharoplasty include double or blurred vision for a few days; temporary swelling at the corner of the eyelids; and a slight asymmetry in healing or scarring. Tiny whiteheads may appear after your stitches are taken out; your surgeon can remove them easily with a very fine needle.

Following surgery, some patients may have difficulty closing their eyes when they sleep; in rare cases this condition may be permanent. Another very rare complication is ectropion, a pulling down of the lower lids. In this case, further surgery may be required.

PLANNING YOUR SURGERY

The initial consultation with your surgeon is very important. The surgeon will need your complete medical history, so check your own records ahead of time and be ready to provide this information. Be sure to inform your surgeon if you have any allergies; if you're taking any vitamins, medications (prescription or over-the-counter), or other drugs; and if you smoke. In this consultation, your surgeon or a nurse will test your vision and assess your tear production. You should also provide any relevant information from your ophthalmologist or the record of your most recent eye exam. If you wear glasses or contact lenses, be sure to bring them along.

You and your surgeon should carefully discuss your goals and expectations for this surgery. You'll need to discuss whether to do all four eyelids or just the upper or lower ones, whether skin as well as fat will be removed, and whether any additional procedures are appropriate.

Your surgeon will explain the techniques and anesthesia he or she will use, the type of facility where the surgery will be performed, and the risks and costs involved. (Note: Most insurance policies don't cover eyelid surgery, unless you can prove that drooping upper lids interfere with your vision. Check with your insurer.)

Don't hesitate to ask your doctor any questions you may have, especially those regarding your expectations and concerns about the results.

PREPARING FOR YOUR SURGERY

Your surgeon will give you specific instructions on how to prepare for surgery, including guidelines on eating and drinking, smoking, and taking or avoiding certain vitamins and medications. Carefully following these instructions will help your surgery go more smoothly.

While you're making preparations, be sure to arrange for someone to drive you home after your surgery, and to help you out for a few days if needed.

WHERE YOUR SURGERY WILL BE PERFORMED

Eyelid surgery may be performed in a surgeon's office-based facility, an outpatient surgery center, or a hospital. It's usually done on an outpatient basis; rarely does it require an inpatient stay.

TYPES OF ANESTHESIA

Eyelid surgery is usually performed under local anesthesia--which numbs the area around your eyes--along with oral or intravenous sedatives. You'll be awake during the surgery, but relaxed and insensitive to pain. (However, you may feel some tugging or occasional discomfort.) Some surgeons prefer to use general anesthesia; in that case, you'll sleep through the operation.

THE SURGERY

Blepharoplasty usually takes one to three hours, depending on the extent of the surgery. If you're having all four eyelids done, the surgeon will probably work on the upper lids first, then the lower ones. In a typical procedure, the surgeon makes incisions following the natural lines of your eyelids; in the creases of your upper lids, and just below the lashes in the lower lids. The incisions may extend into the crow's feet or laugh lines at the outer corners of your eyes. Working through these incisions, the surgeon separates the skin from underlying fatty tissue and muscle, removes excess fat, and often trims sagging skin and muscle. The incisions are then closed with very fine sutures. If you have a pocket of fat beneath your lower eyelids but don't need to have any skin removed, your surgeon may perform a transconjunctival blepharoplasty. In this procedure the incision is made inside your lower eyelid, leaving no visible scar. It is usually performed on younger patients with thicker, more elastic skin.

AFTER YOUR SURGERY

After surgery, the surgeon will probably lubricate your eyes with ointment and may apply a bandage. Your eyelids may feel tight and sore as the anesthesia wears off, but you can control any discomfort with the pain medication prescribed by your surgeon. If you feel any severe pain, call your surgeon immediately.

Your surgeon will instruct you to keep your head elevated for several days, and to use cold compresses to reduce swelling and bruising. (Bruising varies from person to person: it reaches its peak during the first week, and generally lasts anywhere from two weeks to a month.) You'll be shown how to clean your eyes, which may be gummy for a week or so. Many doctors recommend eyedrops, since your eyelids may feel dry at first and your eyes may burn or itch. For the first few weeks you may also experience excessive tearing, sensitivity to light, and temporary changes in your eyesight, such as blurring or double vision.

Your surgeon will follow your progress very closely for the first week or two. The stitches will be removed two days to a week after surgery. Once they're out, the swelling and discoloration around your eyes will gradually subside, and you'll start to look and feel much better.

GETTING BACK TO NORMAL

You should be able to read or watch television after two or three days. However, you won't be able to wear contact lenses for about two weeks, and even then they may feel uncomfortable for a while.

Most people feel ready to go out in public (and back to work) in a week to 10 days. By then, depending on your rate of healing and your doctor's instructions, you'll probably be able to wear makeup to hide the bruising that remains. You may be sensitive to sunlight, wind, and other irritants for several weeks, so you should wear sunglasses and a special sunblock made for eyelids when you go out.

Your surgeon will probably tell you to keep your activities to a minimum for three to five days, and to avoid more strenuous activities for about three weeks. It's especially important to avoid activities that raise your blood pressure, including bending, lifting, and rigorous sports. You may also be told to avoid alcohol, since it causes fluid retention.

YOUR NEW LOOK

Healing is a gradual process, and your scars may remain slightly pink for six months or more after surgery. Eventually, though, they'll fade to a thin, nearly invisible white line.

On the other hand, the positive results of your eyelid surgery--the more alert and youthful look--will last for years. For many people, these results are permanent.

I have read and I understand all the options available, and the limitations of surgery. I am aware of all the possible risks and complications of the proposed procedure and they have been explained to me in detail.

Patient's Signature

Witness

Date

Patient's Initial

CONSENT FORM BLEPHAROPLASTY

1. I, _____, authorize Dr. _____ to perform on me an operation known as blepharoplasty, also known as eyelid lift. This procedure is undertaken for the sole purpose of attempting to remove excess skin, fat and/or muscle from the eyelids to improve my appearance and/or improve my peripheral vision.

Blepharoplasty surgery will be performed on:

(Circle one)

Both upper eyelids

Both lower eyelids

All four eyelids

One eyelid _____

Treatment will be delivered in the:

(Circle one)

Office operating room

Hospital

Surgicenter

2. The nature and purpose of blepharoplasty surgery have been explained to me as well as any feasible alternatives, including having no surgery at all. I understand that my doctor will attempt to improve my appearance and/or peripheral vision by removing skin and/or fat and/or muscle tissue from my eyelids. Droopiness caused by forehead or brow relaxation or defective support within the deeper eyelid tissue will not be improved by this operation. I understand that blepharoplasty surgery gives a relatively long lasting result, but I have not been promised any permanent correction from the progressive changes of aging.
3. I consent to the administration of anesthetics or sedative medications, which will be given orally, by injection into the tissue, by injection into a vein, or by inhalation.
4. I consent to the performance of any other additional medical or surgical procedures that my doctor feels are medically necessary during the course of my operation if arising due to unforeseen circumstances or complications during the operation.
5. I know that the practice of medicine and surgery is not an exact science and that reputable practitioners cannot guarantee results. No guarantee or assurance has been given by anyone as to the results that may be obtained.

6. All medical and surgical treatment carries with it the possibility of adverse reactions and complications. The following list of potential complications is not intended to scare you but rather inform you of the major possible adverse reactions that could occur from surgery on the eyelids.

I understand the major risks and complications of blepharoplasty surgery to include the following:

From anesthesia: Serious heart or breathing problems, drug reactions, allergy

From surgery: Infection, excessive bleeding, loss of vision, double vision, inability to close the eyelids fully, droopy upper eyelids, retracted lower eyelids, poor cosmetic result, over-correction, under-correction, scarring, tearing, the need for additional surgery.

7. I consent to the photographing of my appearance before, during, and after the surgery for medical documentation and/or insurance-related purposes.
8. I consent to the disposal of any tissues removed surgically.
9. I have been advised of the nature of the proposed surgery and anesthesia to my satisfaction. If I desire any additional explanation of the foregoing or further information about the operation and its risks and possible complications, this has been given to me prior to the signing of this surgical consent.

The following is to confirm that we have discussed with you the nature of your condition, the proposed treatment thereof, the prospects for success and the limited risks of potential side effects associated with such treatment/s. As per current medical knowledge any potential side effects resulting from our treatments are reversible and temporary in nature.

By signing this form, you confirm and consent to the following:

1. My medical condition and the proposed treatment have been explained to me. I have been advised that although good results are expected, the possibility and nature of complications cannot be accurately anticipated and therefore, there can be no guarantee, either expressed or implied as to the success or other result of treatment.
2. The potential side-effects of the treatment being idiosyncratic reactions (reactions specific to an individual), such as: bruising, temporary pain and itching, redness, infection, onset of herpes, onset of acne, burning and blistering, fat necrosis, facial nerve affection, unsatisfactory cosmetic result, extrusion, swelling, transient skin discoloration, allergic reaction, and reversible brow or eyelid ptosis, have been explained to me.
3. I declare that while completing the medical questionnaire, I have answered the information related to my personal medical history questions completely and I have not withheld any information.

I have consulted with the physician or therapist (depending on the nature of treatment) who will be treating me and all my questions concerning the treatment have been answered to my satisfaction. I fully understand all of the above and thereafter, I consent to the proposed treatment/s

Patient's Signature

Witness

Date

PRE-OPERATIVE INSTRUCTIONS

- **No eating or drinking after midnight(if surgery is in the afternoon, no eating or drinking minimum 8 hours before the surgery).**

No pain medications that contain aspirin (Tylenol or other brand that has no aspirin is the only pain medication you can take), no inflammatory drugs, no vitamin E etc. for 7 days before and after the surgery (check the list of medications on the next page).

If you are presently taking high blood pressure medication, you may take your medication the morning of surgery with as little water as possible. Please make sure that Dr. _____ is aware that you are taking medication.

No Alcoholic drinks 3 days before and after surgery.

No smoking at least 2 weeks before and after surgery. For facelift patients smoking is not allowed for a minimum of 4 weeks before and after surgery.

No exercise for 2 days before surgery. No exercise 4 weeks after surgery.

Do not wear make-up, including false eye lashes, lipstick, nail polish, and contact lenses the day of your surgery.

Wear a loose button down shirt, loose pant and sandal (NO TIGHT CLOTHING PLEASE) cloths may get dirty so it is better to wear old clothing.

Take a bath and use antibiotic soaps the morning before surgery.

For tummy tuck and liposuction patients, DO NOT shave your pubic hair before the surgery.

Bring your prescriptions with you the day of your surgery.

Make sure that a responsible person will be with you to give you a ride home and be with you 24-48 hours after your surgery.

For female patients, make sure that you are not pregnant before the surgery.

You may bring a scarf, sun glasses or other articles to cover your dressings when leaving the office.

It is best not to have a permanent or hair coloring within 7 days prior to surgery. Be punctual. If you are delayed, please call the hospital or the office.

Be assured that we will do everything within our power to make your surgical experience as convenient and comfortable.

Thank you for your confidence in us.

PAYMENT POLICY

Surgeon's fee has to be paid in cash 1 week before surgery. Cashier's check or Bank check is acceptable.

Patient is responsible to pay hospital fee the day before surgery.

CANCELLATION/ REFUND POLICY:

20% of the Total amount IS NOT REFUNDABLE if you decided to cancel the surgery after the day of your pre-operative visit.

I have read and I understand the payment and cancellation policy.

Patients Signature

Date

TWO WEEKS BEFORE SURGERY

PLEASE READ CAREFULLY

DO NOT take any medication containing aspirin or acetylsalicylic acid, which is aspirin, two weeks prior to surgery. To be safe, check medicine labels for ingredients. When in doubt, please feel free to call our office. If needed Tylenol can be substituted for aspirin.

The following is a list of common medications containing aspirin:

A.P.C. Tabs	DeWitt's Pills	Norgesic
Advil	Doan's Pills	Nuprin
Alka Seltzer Plus	Dristan	pepto-Bismol
Anacin	Ecotrin	Persiten
Ascriptin	Empirin	Percodan
Aspergum	Equigesic	Rhinex
BC Powder	Emprazil	Robaxisal Tabs
Bayer	Flogesic	Salicylsallycylic
Bufferin	Floralin	Sinulin
Butal compound	Ibuprofen	Soma compound
Cama Arthritis	Isolyle	St. Joseph Aspirin
Comprazil Tabs	Measuring Tabs	Supoac
Contact	Midol	Synalgas

Cope
Coricidin tabs
Darvon
Dasin

Momentum
Motrin
Nervine

Triaminicin Tabs
Ursinus
Vanquish
Zorpin

POST-OPERATIVE INSTRUCTIONS- BLEPHAROPLASTY

General Information

- Do not drive a car or operate machinery for 24-48 hours.
- Do not make any important decisions or sign any papers for the next 24 hours.
- Do not consume any alcohol for at least 10-14 days after your procedure.
- **Do not use tranquilizers, sleeping medications, or any nonprescribed medications unless approved by your physician. Avoid for 14 days any type of Nsaids (non-steroidal anti-inflammatory drugs) i.e., Advil, Ibuprofen, Aleve, Naprosyn, Etc.**
- **No Aspirin for 14 days.**
- Do not smoke for a minimum of 4 weeks.
- Avoid sun exposure for at least 4-6 weeks post-operatively, and then use sun block if necessary.
- Please have a responsible person with you for 24-48 hours.

Activity

- Rest for the remainder of the day.
- Exercise is to be eliminated for the first 2 weeks, then start light activity (walking, etc.). Moderate activity can be started in 3 weeks (stationary bike) and full activity may be resumed at four weeks post-operatively.
- Do not do any type of lifting for 1 week, after your surgery
- Keep you head higher than your heart, when tighing shoes, lift feet to avoid bending over.

Treatment

- Start ice packs for the eyes. You may soak a soft washcloth or gauze with ice water and place on eyes for 30 minutes every 2-3 hours Do this for the first 24-36 hours. Ice pack to the forehead may also be helpful.
- A light coat of ophthalmic bacitracin ointment should be applied 3x's daily. Continue for 1 week.
- Your sutures are dissolvable.
- Sleeping with head elevated is recommended for the first 7 days, this helps prevent swelling. Place 3-4 pillows under the head neck and back to keep at a 45-degree angle.
- If you need to clean your lashes, cotton swab moistened with water or saline work well.
- Eye make up may be used after 2 weeks, contact lenses may be started again after 3 weeks.

Medications

- **Next dose of medications may be given:**

Pain medication	_____	@	_____
Antibiotics	_____	@	_____
Steroids	_____	@	_____
Other	_____	@	_____

Diet

- Begin with clear liquids and progress to your normal diet if not nauseated.
- Avoid greasy and spicy foods.

Notify Physician @-----

IF ANY OF THE FOLLOWING PERSIST:

- Chills fever (above 101 F degrees).

- Persistent nausea or vomiting.
- Persistent bleeding or swelling at operative site.
- Unable to urinate in 6-8 hours.
- Pain medication is not relieved by medication.

Follow Up care

Next appointment is scheduled-----At-----office.

