

Patient's Name: _____
Date of Surgery: _____

Patient Educational Information: Provided by
American Society of Plastic Surgeons

RHINOPLASTY

Rhinoplasty, or surgery to reshape the nose, is one of the most common of all plastic surgery procedures. Rhinoplasty can reduce or increase the size of your nose, change the shape of the tip or the bridge, narrow the span of the nostrils, or change the angle between your nose and your upper lip. It may also correct a birth defect or injury, or help relieve some breathing problems.

If you're considering Rhinoplasty, 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 RHINOPLASTY

Rhinoplasty 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 Rhinoplasty are people who are looking for improvement, not perfection, in the way they look. If you're physically healthy, psychologically stable, and realistic in your expectations, you may be a good candidate.

Rhinoplasty can be performed to meet aesthetic goals or for reconstructive purposes-to correct birth defects or breathing problems.

Age may also be a consideration. Many surgeons prefer not to operate on teenagers until after they've completed their growth spurt-around 14 or 15 for girls, a bit later for boys. It's important to consider teenagers' social and emotional adjustment, too, and to make sure it's what they, and not their parents, really want.

ALL SURGERY CARRIES SOME UNCERTAINTY AND RISK

When Rhinoplasty is performed by a qualified plastic surgeon, complications are infrequent and usually minor. Nevertheless, there is always a possibility of complications, including infection, nosebleed, or a reaction to the anesthesia. You can reduce your risks by closely following your surgeon's instructions both before and after surgery.

After surgery, small burst blood vessels may appear as tiny red spots on the skin's surface; these are usually minor but may be permanent. As for scarring, when Rhinoplasty is performed from inside the nose, there is no visible scarring at all; when an "open" technique is used, or when the procedure calls for the narrowing of flared nostrils, the small scars on the base of the nose are usually not visible.

In about one case out of ten, a second procedure may be required-for example, to correct a minor deformity. Such cases are unpredictable and happen even to patients of the most skilled surgeons. The corrective surgery is usually minor.

PLANNING YOUR SURGERY

Good communication between you and your physician is essential. In your initial consultation, the surgeon will ask what you'd like your nose to look like, evaluate the structure of your nose and face, and discuss the possibilities with you. He or she will also explain the factors that can influence the procedure and the results. These factors include the structure of your nasal bones and cartilage, the shape of your face, the thickness of your skin, your age, and your expectations.

Your surgeon will also explain the techniques and anesthesia he or she will use, the type of facility where the surgery will be performed, the risks and costs involved, and any options you may have. Most insurance policies don't cover purely cosmetic surgery; however, if the procedure is performed for reconstructive purposes, to correct a breathing problem or a marked deformity, the procedure may be covered. Check with your insurer, and obtain pre-authorization for your surgery. Be sure to tell your surgeon if you've had any previous nose surgery or an injury to your nose, even if it was many years ago. You should also inform your surgeon if you have any allergies or breathing difficulties; if you're taking any medications, vitamins, or recreational drugs; and if you smoke.

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, taking or avoiding certain vitamins and medications, and washing your face. 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

Rhinoplasty 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, for cost containment and convenience. Complex procedures may require a short inpatient stay.

Specialist Plastic Surgeon

Patient's Initial

TYPES OF ANESTHESIA

Rhinoplasty can be performed under local or general anesthesia, depending on the extent of the procedure and on what you and your surgeon prefer. With local anesthesia, you'll usually be lightly sedated, and your nose and the surrounding area will be numbed; you'll be awake during the surgery, but relaxed and insensitive to pain. With general anesthesia, you'll sleep through the operation.

THE SURGERY

Rhinoplasty usually takes 2 to 3 hours, though complicated procedures may take longer. During surgery the skin of the nose is separated from its supporting framework of bone and cartilage, which is then sculpted to the desired shape. The nature of the sculpting will depend on your problem and your surgeon's preferred technique. Finally, the skin is redraped over the new framework.

Many plastic surgeons perform Rhinoplasty from within the nose, making their incision inside the nostrils. Others prefer an "open" procedure, especially in more complicated cases; they make a small incision across the columella, the vertical strip of tissue separating the nostrils. When the surgery is complete, a splint will be applied to help your nose maintain its new shape. Nasal packs or soft plastic splints also may be placed in your nostrils to stabilize the septum, the dividing wall between the air passages.

AFTER YOUR SURGERY

After surgery-particularly during the first twenty-four hours-your face will feel puffy, your nose may ache, and you may have a dull headache. You can control any discomfort with the pain medication prescribed by your surgeon. Plan on staying in bed with your head elevated (except for going to the bathroom) for the first day. You'll notice that the swelling and bruising around your eyes will increase at first, reaching a peak after two or three days. Applying cold compresses will reduce this swelling and make you feel a bit better. In any case, you'll feel a lot better than you look. Most of the swelling and bruising should disappear within two weeks or so. (Some subtle swelling-unnoticeable to anyone but you and your surgeon-will remain for several months.) A little bleeding is common during the first few days following surgery, and you may continue to feel some stuffiness for several weeks. Your surgeon will probably ask you not to blow your nose for a week or so, while the tissues heal. If you have nasal packing, it will be removed after a few days and you'll feel much more comfortable. By the end of one or, occasionally, two weeks, all dressings, splints, and stitches should be removed.

GETTING BACK TO NORMAL

Most Rhinoplasty patients are up and about within two days, and able to return to school or sedentary work a week or so following surgery. It will be several weeks, however, before you're entirely up to speed.

Your surgeon will give you more specific guidelines for gradually resuming your normal activities. They're likely to include these suggestions: Avoid strenuous activity (jogging, swimming, bending, sexual relations-any activity that increases your blood pressure) for two to three weeks. Avoid hitting or rubbing your nose, or getting it sunburned, for eight weeks. Be gentle when washing your face and hair or using cosmetics. You can wear contact lenses as soon as you feel like it, but glasses are another story. Once the splint is off, they'll have to be taped to your forehead or propped on your cheeks for another six to seven weeks, until your nose is completely healed.

Your surgeon will schedule frequent follow-up visits in the months after surgery, to check on the progress of your healing. If you have any unusual symptoms between visits, or any questions about what you can and can't do, don't hesitate to call your doctor.

YOUR NEW LOOK

In the days following surgery, when your face is bruised and swollen, it's easy to forget that you will be looking better. In fact, many patients feel unhappy for a while after plastic surgery-it's quite normal and understandable.

Rest assured that this stage will pass. Day by day, your nose will begin to look better and your spirits will improve. Within a week or two, you'll no longer look as if you've just had surgery.

Still, healing is a slow and gradual process. Some subtle swelling may be present for months, especially in the tip. The final results of Rhinoplasty may not be apparent for a year or more.

In the meantime, you might experience some unexpected reactions from family and friends. They may say they don't see a major difference in your nose. Or they may act resentful, especially if you've changed something they view as a family or ethnic trait. If that happens, try to keep in mind why you decided to have this surgery in the first place. If you've met your goals, then your surgery is a success.

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

Specialist Plastic Surgeon

Patient's Initial

INFORMED CONSENT-RHINOPLASTY SURGERY

This is an informed consent document that has been prepared to help your plastic surgeon inform you concerning Rhinoplasty surgery, 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

Surgery of the nose (Rhinoplasty) is an operation frequently performed by plastic surgeons. This surgical procedure can produce changes in the appearance, structure, and function of the nose. Rhinoplasty can reduce or increase the size of the nose, change the shape of the tip, narrow the width of the nostrils, or change the angle between the nose and the upper lip. This operation can help correct birth defects, nasal injuries, and help relieve some breathing problems. There is not a universal type of Rhinoplasty surgery that will meet the needs of every patient. Rhinoplasty surgery is customized for each patient, depending on his or her needs. Incisions may be made within the nose or concealed in inconspicuous locations of the nose in the open Rhinoplasty procedure. In some situations, cartilage grafts, taken from within the nose or from other areas of the body may be recommended in order to help reshape the structure of the nose. Internal nasal surgery to improve nasal breathing can be performed at the time of the Rhinoplasty. The best candidates for this type of surgery are individuals who are looking for improvement, not perfection, in the appearance of their nose. In addition to realistic expectations, good health and psychological stability are important qualities for a patient considering Rhinoplasty surgery. Rhinoplasty can be performed in conjunction with other surgeries.

ALTERNATIVE TREATMENT

Alternative forms of management consist of not undergoing the Rhinoplasty surgery. Certain internal nasal airway disorders may not require surgery on the exterior of the nose. Risks and potential complications are associated with alternative forms of treatment that involve surgery such as Septoplasty to correct nasal airway disorders.

RISKS of RHINOPLASTY 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 these complications, you should discuss each of them with your plastic surgeon to make sure you understand the risks, potential complications and consequences of Rhinoplasty.

Bleeding- It is possible, though unusual, that you may have problems with bleeding during or after surgery. Should post-operative bleeding occur, it may require emergency treatment to stop the bleeding, or require a 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. Non-prescription "herbs" and dietary supplements can increase the risk of surgical 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.

Infection- Infection is quite unusual after surgery. Should an infection occur, additional treatment including antibiotics may be necessary.

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

Damage to deeper structures- Deeper structures such as nerves, tear ducts, blood vessels and muscles may be damaged during the course of surgery. The potential for this to occur varies with the type of Rhinoplasty procedure performed. Injury to deeper structures may be temporary or permanent.

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

Numbness- There is the potential for permanent numbness within the nasal skin after Rhinoplasty. The occurrence of this is not predictable. Diminished (or loss of skin sensation) in the nasal area may not totally resolve after Rhinoplasty.

Asymmetry- The human face is normally asymmetrical. There can be a variation from one side to the other in the results obtained from a Rhinoplasty procedure.

Chronic pain- Chronic pain may occur very infrequently after Rhinoplasty.

Skin disorders/skin cancer- Rhinoplasty is a surgical procedure to reshape of both internal and external structure of the nose. Skin disorders and skin cancer may occur independently of a Rhinoplasty.

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 used during surgery and prescription medicines. Allergic reactions may require additional treatment.

Delayed healing- Wound disruption or delayed wound healing is possible. Some areas of the face may not heal normally and may take a long time to heal. Areas of skin may die. This may require frequent dressing changes or further surgery to remove the non-healed tissue.

Long term effects- Subsequent alterations in nasal appearance may occur as the result of aging, sun exposure, or other circumstances not related to Rhinoplasty surgery. Future surgery or other treatments may be necessary to maintain the results of a Rhinoplasty operation.

Nasal septal perforation- There is the possibility that surgery will cause a hole in the nasal septum to develop. The occurrence of this is rare. However, if it occurs, additional surgical treatment may be necessary to repair the hole in the nasal septum. In some cases, it may be impossible to correct this complication.

Nasal airway alterations- Changes may occur after a Rhinoplasty or Septoplasty operation that may interfere with normal passage of air through the nose.

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.

Substance abuse disorders- Individuals with substance abuse problems that involve the inhalation of vasoconstrictive drugs such as cocaine are at risk for major complications including poor healing and nasal septal perforation.

ADDITIONAL SURGERY MAY BE NECESSARY

There are many variable conditions in addition to risk and potential surgical complications that may influence the long term result from Rhinoplasty surgery. Even though risks and complications occur infrequently. The risks cited are particularly associated with Rhinoplasty surgery. Other complications and risks can occur but are even more uncommon. Should complications occur, additional surgery or other treatments may be necessary. 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, as to the results that may be obtained. Infrequently, it is necessary to perform additional surgery to improve your results.

FINANCIAL RESPONSIBILITIES

The cost of surgery involves several charges for the services provided. The fees are divided to the following: Dr. _____'s fee, the cost of the implants (If needed), hospital fee (operating room, & anesthesia) an over night stay at the hospital will be an additional charge if patient decide to stay. Mammogram, lab test or x-ray will be an additional charge. Additional costs may occur should complications develop from the surgery. Secondary surgery or hospital day-surgery charges involved with revisionary surgery would also be your responsibility.

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). The 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 on the next page.



Specialist Plastic Surgeon

Patient's Initial

CONSENT FOR SURGERY/ PROCEDURE or REATMENT

1. I hereby authorize Dr. _____ and such assistants as may be selected to perform the following procedure or treatment: Rhinoplasty - Nose Surgery

I have received the following information sheet:

INFORMED CONSENT for RHINOPLASTY SURGERY

2. I recognize that during the course of the operation 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 involves 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

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

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 or Person Authorized to Sign for Patient

Date _____ Witness _____



PRE-OPERATIVE INSTRUCTIONS

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- **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 minimum of 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 24 hours 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.

Dr. _____

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Patient's Initial

PAYMENT POLICY

FULL PAYMENT TO BE PAID IN CASH OR CREDIT CARD PREFERABLY 5-7 DAYS BEFORE THE SURGERY.

Patient is responsible to pay hospital overnight stay charges.

CANCELLATION/ REFUND POLICY:

20% of 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

1 WEEK BEFORE SURGERY

PLEASE READ CAREFULLY

DO NOT take any medication containing aspirin or acetylsalicylic acid, which is aspirin, minimum of 7 days 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	Salicylsalicylic
Bufferin	Florinal	Sinulin
Butal compound	Ibuprofen	Soma compound
Cama Arthritis	Isolyle	St. Joseph Aspirin
Comprazil Tabs	Measuring Tabs	Supoac
Contact	Midol	Synalgas
Cope	Momentum	Triaminicin Tabs
Coricidin tabs	Motrin	Ursinus
Darvon	Nervine	Vanquish
Dasin		Zorpin

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Patient's Initial

POST-OPERATIVE INSTRUCTIONS- RHINOPLASTY

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 a minimum of 7 days.**
- Do not smoke for a minimum of 1 week.
- 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.
- Packing will be removed the next day.
- Your sutures may be 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.
- Splint will be removed after 7 days.

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 is not relieved by pain medication.

Follow Up care

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

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