GENERAL SURGICAL RISKS

ABOUT RISKS:

It is important that you understand fully the risks involved in surgery so that you can make an informed decision. Although complications are infrequent, all surgeries have some degree of risk. My staff and I will use our expertise and knowledge to avoid complications in so far as we are able. If a complication does occur, we will use those same skills in an attempt to solve the problem quickly.

In general, the least serious problems occur more often and the more serious problems occur rarely. If a complication does arise, you, the doctor and the nursing staff will work together to help resolve the problem. Most complications involve an extension of the recovery period rather than any permanent effect on your final result.

NORMAL SYMPTOMS:

SWELLING AND BRUISING: Moderate swelling and bruising are normal after any surgery. Severe swelling and bruising may indicate bleeding or possible infection.

DISCOMFORT AND PAIN: Mild to moderate discomfort or pain is normal after any surgery. If the pain becomes severe and is not relieved by pain medications, please call our office during normal business hours or call Dr. McCormack directly after hours. She will provide you with her cell phone number prior to surgery.

CRUSTING ALONG THE INCISION LINES: Crusting is common along suture lines. We usually treat this with hydrogen peroxide and/or antibiotic ointment (Bacitracin or Polysporin ointment). Do not apply make-up on suture line until all the crusting is gone.

NUMBNESS: Small sensory nerves to the skin surface are occasionally cut when an incision is made. Usually, the sensation in those areas gradually returns.... usually within 3-6 months as the nerve endings heal spontaneously.

ITCHING: Itching and occasional small shooting electrical sensations within the skin often occur as the nerve endings heal. Ice, skin moisturizers, and massages are frequently helpful. These symptoms are common during the recovery period.

REDNESS OF SCARS: All new scars are red, dark pink, or purple. Scars on the face usually fade within 3-6 months. Scars on the breasts or body may take a year or longer to fade.

DARKNESS OF SCARS: Hyperpigmentation or darkening of scars may occur. This is more likely to occur in dark-skinned patients. The doctor may prescribe some medication to guard against darkening of your scars, especially if you have a prior history of hyperpigmentation of scars.

COMMON RISKS

HEMATOMA: Small collections of blood under the skin are usually allowed to absorb spontaneously. Larger hematomas may require aspiration, drainage, or even surgical removal to achieve the best result.

INFLAMMATION AND INFECTION: A superficial infection may require antibiotic ointment. Deeper infections are treated with oral antibiotics. Development of an abscess may require drainage.

THICK, WIDE, OR DEPRESSED SCARS: Abnormal scars may occur even though the doctor takes extra care to close all incisions as perfectly as possible. Injection of steroids into the scars, placement of silicone sheeting onto the scars, or further surgery to correct scars is occasionally necessary. Some areas on the body scar more than others, and some people scar more than others do. Your own history of scarring should give you some indication of what you can expect. Massage may also help.

WOUND SEPARATION OR DELAYED HEALING: Any incision, during the healing phase, may separate or heal unusually slowly for a number of reasons. These include inflammation, infection, excessive wound tension, decreased circulation, smoking, protein depletion and nutritional status or excessive external pressure. If delayed healing occurs, the final outcome is usually not significantly effected, but secondary revision of the scar may be necessary.

SENSITIVITY OR ALLERGY TO DRESSINGS OR TAPE: Occasionally, allergic or sensitivity reactions may occur from soaps, ointments, tape or sutures used during or after surgery. Such problems are not common and are usually mild and easily treated. In extremely rare circumstances, allergic reactions can be severe and require aggressive treatment or even hospitalization.

UNCOMMON RISKS

INCREASED RISKS FOR SMOKERS: Smokers have a greater chance of skin loss and poor healing because of decreased circulation to the skin.

INJURY TO DEEPER STRUCTURES: Blood vessels, nerves and muscles may be injured during surgery. The incidence of such injuries is rare.

If they are severe, any of the problems mentioned under Common Risks may significantly delay healing or necessitate further surgical procedures.

Medical complications such as pulmonary embolism, severe allergic reactions to medications, cardiac arrhythmias, heart attack, and hyperthermia are rare but serious and life-threatening problems. Having a board-certified anesthesiologist present at your surgery reduces these risks as much as possible. (Failure to disclose all pertinent medical

data before surgery may cause serious problems for you and for the medical team during surgery.)

UNSATISFACTORY RESULT AND THE NEED FOR REVISIONAL SURGERY:

All plastic surgery treatments and operations are performed to improve a condition, a problem or appearance. While the procedures are performed with a very high probability of success, disappointments occur and results are not always acceptable to patients or the surgeon. Secondary procedures or treatments may be indicated. Rarely, problems may occur that are permanent.

POOR RESULTS:

Despite the use of the best plastic surgery techniques available, asymmetry, unhappiness with the result, poor healing, and suboptimal results may occur. Sometimes revisional surgery is necessary to achieve the desired result.