

“RISKS OF MEDICAL INTERVENTION” – APPENDIX No. N 2

INFORMED CONSENT – FACELIFT SURGERY

“Appendix No. N 2 – RISKS OF MEDICAL INTERVENTION” was approved by “ARZ EST” LLC on 02.05.2019 by Order No. 01/5. This document constitutes an integral part of the contract concluded between “ARZ EST” LLC and the Client.

INDICATIONS

This document constitutes an informed consent form and has been prepared to help you become familiar with facelift (facial lifting) surgery, the risks associated with it, as well as alternative treatment methods. It is important to read this information carefully and in full.

GENERAL INFORMATION

A facelift is a surgical procedure intended to improve signs of aging in the face and neck. With age, facial skin loses elasticity and begins to sag.

A facelift does not stop the aging process. It can reduce the appearance of age-related changes by tightening the deeper tissues, removing excess skin, and, when necessary, removing fatty tissue from certain areas.

The procedure may be performed alone or in combination with other procedures, such as a brow lift, liposuction, blepharoplasty (eyelid surgery), or rhinoplasty.

The procedure is individualized for each patient. The best candidate is a patient with beginning sagging of the facial and neck skin, preserved skin elasticity, and well-defined bone structure.

ALTERNATIVE TREATMENT METHODS

An alternative is to decline surgery. Sagging skin, wrinkles, and fatty deposits may be corrected using other methods, including laser procedures, chemical peels, or liposuction.

Alternative methods are also associated with risks and possible complications.

SURGICAL RISKS OF FACELIFT SURGERY

Every surgical procedure is associated with certain risks and complications. Each surgical intervention has its own limitations. The decision to undergo surgery is made based on a comparison of the potential benefits and risks.

Although most patients do not experience complications, each potential risk should be discussed with your plastic surgeon.

SPECIFIC RISKS OF FACELIFT SURGERY

Hair Loss

Hair loss may occur in the scalp area or around the surgical incisions. This complication is unpredictable.

Nerve Damage

Damage to motor and sensory nerves may occur during surgery. This may result in temporary or permanent reduction or loss of facial movement. Changes in sensation in the face, neck, and ear areas are usually temporary and are extremely rarely permanent. Pain caused by nerve scarring is uncommon.

3D Modeling

The results of preoperative 3D modeling may not correspond to the actual postoperative result.

Skin Loss / Residual Excess Skin

Loss of areas of skin or persistence of residual excess skin after surgery may occur.

GENERAL SURGICAL RISKS

Healing Problems

Certain medical conditions, dietary supplements, and medications may slow healing. Patients who have experienced significant weight loss may develop delayed healing, wound separation, infections, or tissue changes that may require additional treatment, repeat surgery, or prolonged hospitalization.

Diabetes and prolonged use of steroids increase the risk of healing complications. Smoking significantly delays recovery and may result in the need for additional surgery.

General risks include swelling, bleeding, prolonged surgery and anesthesia, the need for repeat intervention, prolonged rehabilitation, changes in skin color and shape, infection, dissatisfaction with the result, and additional expenses.

The quality and elasticity of the skin do not change; recurrent sagging may occur over time.

Small nerve endings may become incorporated into scar tissue, causing tenderness or increased sensitivity. Massage and conservative treatment are often helpful.

It should be understood that surgery also carries general surgical risks, including the risk of death.

Bleeding

Bleeding may rarely occur during or after surgery. Postoperative bleeding may require urgent intervention or a blood transfusion, although this is rare.

Early physical activity increases the risk of bleeding. Aspirin and anti-inflammatory medications should not be taken for 10 days before and after surgery.

A hematoma most commonly occurs during the first three weeks after surgery. Blood transfusion carries a risk of transmission of infections, including hepatitis and HIV. The use of heparin may increase the risk of bleeding and decreased platelet levels.

Infection

Infections are uncommon but may require treatment with antibiotics, hospitalization, or repeat surgery. Infections in other parts of the body may spread to the surgical area.

Scarring

Scars remain after surgery. Thick, prominent, asymmetric, or differently colored scars may occur. In some cases, additional correction may be required.

Irregularities of Skin Contour

Visible and palpable irregularities and skin folding may occur. Residual excess skin (“dog ears”) may form along the edges of the incisions.

Changes in Skin Color / Swelling

Swelling and inflammation are common. The skin may become darker or lighter. In rare cases, these changes may be prolonged or permanent.

Increased Skin Sensitivity

Itching and hypersensitivity to heat or cold may occur. These symptoms usually resolve during the recovery period but may rarely become chronic.

Wound Separation

Wounds may open, requiring additional treatment or repeat surgery.

Sutures

Deep sutures may be palpable, become visible, or cause irritation requiring their removal.

Damage to Deep Structures

Damage to nerves, blood vessels, muscles, and other structures may occur. Such injuries may be temporary or permanent.

Fat Necrosis

Death of fatty tissue may occur, resulting in areas of firmness and pain. Additional surgery may be required.

Seroma

Fluid may accumulate between the skin and underlying tissues and may require drainage.

Anesthesia

Both local and general anesthesia are associated with risks of complications, injury, and even death.

Shock

Severe systemic reactions may rarely occur, requiring hospitalization and intensive treatment.

Pain

Pain of varying intensity may occur after surgery. In rare cases, pain may become chronic.

Cardiovascular and Respiratory Complications

Thrombosis, pulmonary embolism, and other potentially life-threatening complications may occur. If shortness of breath, chest pain, or abnormal heart rhythm occurs, immediate medical attention should be sought.

Allergic Reactions

Reactions to suture materials, adhesives, medications, or blood components may occur. In rare cases, anaphylactic shock may occur.

Asymmetry

Asymmetry may occur after surgery. Additional corrective surgery may be required.

Delayed Healing

Wound separation, prolonged healing, and skin necrosis may occur. Smokers have an increased risk of complications.

Unsatisfactory Result

There is no guarantee of a particular result. Unsatisfactory scarring, deformities, loss of sensation, and the need for repeat surgery may occur.

ADDITIONAL RECOMMENDATIONS

Smoking and Nicotine

Smoking and nicotine increase the risk of complications, skin necrosis, and delayed healing.

Medications and Supplements

Aspirin and certain medications increase the risk of bleeding. Do not discontinue prescribed therapy without consulting your physician. Pain medications may affect coordination; driving and alcohol consumption should be avoided.

Sun Exposure

Sun exposure may impair healing and cause pigmentation of scars.

Travel

Complications that delay recovery may occur. There are no guarantees regarding the time required to return to normal activities.

Long-Term Changes

Aging, fluctuations in weight, pregnancy, menopause, and other factors may affect the result.

Psychological Aspects

Realistic expectations are necessary. Repeat surgery may sometimes be required.

NEED FOR REPEAT SURGERY

Additional surgery may be required to correct complications or improve the result.

COMPLIANCE WITH RECOMMENDATIONS

Strict compliance with all physician recommendations is essential to achieving a successful outcome.

NOTICE

This informed consent document is intended to explain the nature of the surgery, its risks, and alternative treatment methods, including the option of declining surgery.

It is not an exhaustive list of all possible risks and does not establish standards of medical care.

It is important to read all of the information carefully and obtain answers to all questions you may have.