



REVITALIZE • REFINE • REJUVENATE

TheNaturalResult.com

Preparing for Surgery

WHAT YOU NEED TO DO NOW:

- **TAKE MULTIVITAMINS:** Start taking a multivitamin once daily to improve your general health.
- **TAKE VITAMIN C:** Start taking 500 mg of Vitamin C twice daily to promote healing.
- **LIMIT VITAMIN E.** Discontinue Vitamin E capsules two (2) weeks before surgery. A multi vitamin containing vitamin E is okay. Extra Vitamin E may cause blood thinning.
- **STOP TAKING ANY FORM OF DIET PILLS FOUR (4) WEEKS PRIOR TO SURGERY.** Some diet pills deplete your endogenous catecholamines. Meaning, if your blood pressure drops (almost all anesthetics lower blood pressure), the usual medications to treat that won't work. Prolonged hypotension (low BP) can lead to heart attacks, strokes, kidney failure or even death. It's a risk that we are not willing to take with your health.
- **DO NOT TAKE ASPIRIN OR IBUPROFEN:** Stop taking medications containing aspirin or ibuprofen. Review the list of drugs containing aspirin and ibuprofen carefully. Such drugs can cause bleeding problems during and after surgery. Instead, use medications containing acetaminophen such as Tylenol.
- If you live more than 30 minutes away, please consider using a local hotel for your first night's stay. Your first post-operative appointment will be the day after surgery and is typically in the morning. Your next appointment will be a one-week post-operative appointment.
- **STOP SMOKING/VAPING:** Smoking causes constriction (narrowing) of small blood vessels and reduces circulation to the skin and impedes healing. Reduction of that blood flow can cause reduced or slow healing, blistering of the skin and in worst case, actual loss of tissue. **It is best to avoid smoking, second hand smoke and cigarette replacements--such as nicotine patches and/or gum--45 days prior to surgery and 45 days after surgery.** Smoking can also interfere with the "waking up" process your body goes through immediately after undergoing anesthesia. Some patients cough excessively and have a hard time breathing immediately after surgery.
- **MINIMIZE ALCOHOL INTAKE:** Minimize your alcohol intake 2 weeks prior and 2 weeks after surgery. Alcohol simply increases the risk of complications and slows down the recovery process.
- Please read over the consent forms provided to you prior to your pre-operative appointment.

PRE-OPERATIVE APPOINTMENT

- It is very important that you arrive on time for your pre-op appointment. Your pre-operative appointment is about 60-minutes long depending on how many procedures you are having done. At this time, a medical assistant will go over your procedure with you and answer any questions you may have. If possible, please bring the person who will care for you after surgery, to this appointment. Further, we will need your full attention, so we ask you do not bring children with you to this appointment.
- If you decide to add or change your surgical procedure(s), please call one of the Patient Care Coordinators **BEFORE** your pre-op appointment. A certain amount of time has been allowed for your surgery and any changes will alter the surgery schedule. We will do our very best to

accommodate your desires.

- The medical assistant will show you the door in which you will enter the day of your surgery and describe the check in process.
- The medical assistant will go over all of your consent forms, answer any questions you may have and then ask you to sign them. Copies will be provided to you upon request.
- The medical assistant will take your “before” photographs.
- The prescriptions you will need to take after surgery will be sent electronically to the pharmacy that you prefer. **Please bring in all medications on your day of surgery.**
- For certain procedures, the medical assistant will give you bruising reduction medication. The medication is started the day of surgery.
- Patients having breast augmentation surgery may want to bring in a few of your own shirts to try on with the breast implant sizers. It is also helpful for you to bring in pictures of the desired look you would like to achieve.
- For patients having breast reduction or breast lift with implants, it is also helpful for you to bring in pictures of the desired look you would like to achieve.
- **The balance for your surgery is due at your pre-operative appointment.** You will see the Patient Care Coordinator, after your visit with the medical assistant, to settle your account balance. Please note, personal checks cannot be accepted any less than two weeks prior to your surgery.

TWO DAYS BEFORE SURGERY

- **CONFIRM SURGERY TIME:** We will call you to confirm the time of your surgery. If you are not going to be at home or are unreachable on your cell phone, please call us to confirm (916-983-9895) after 12pm. Surgery start times can change so please be available the entire day of surgery to accommodate unforeseen changes.
- Confirm with the person who will bring you the day of surgery, take you home and care for you the first 24 hours. Make sure your personal affairs are taken care of such as grocery shopping, household chores, banking, childcare if necessary, etc.

THE DAY BEFORE SURGERY

- Make sure all of your prescriptions are filled and in a bag to bring to surgery with you.
- The Anesthesiologist may call you this evening. Please be available to take his/her call as he/she will go over general information with you about your procedure. Don't worry if you do not receive a call, the Anesthesiologist will see you prior to your surgery.
- **EATING AND DRINKING:** **Do not eat or drink anything 10-hours prior to your surgery. You may take your daily-prescribed medication with a sip of water.**

THE DAY OF SURGERY

- **ORAL HYGIENE:** You may brush your teeth but do not swallow any water.
- **CLEANSING:** Shower and wash your hair, as well as the surgical areas.
- **MAKE-UP:** Please **DO NOT** wear any make-up, deodorant, moisturizers, creams or lotions.
- **JEWELRY:** Please do not wear any jewelry. This includes belly button rings and **ANY** piercings. If you have any piercings that cannot be removed or are difficult to remove, please bring this to the attention of our medical staff.
- **DO NOT WEAR:** Hairpins and/or wigs, as well as contact lenses. Please wear your eyeglasses the day of surgery.
- **CLOTHING:** Wear a comfortable, two (2) piece loose-fitting outfit (one that does not go over your head) such as sweat pants and a zip up hoodie. **NO YOGA PANTS, LEGGINGS OR EXERCISE PANTS.** Wear slip on shoes such as slippers. If you have long hair, tie it back. You may want to bring or wear socks to keep your feet warm.
- **ARRIVE:** Two hours prior to your surgery time—remember, we will call you two days prior to surgery to let you know your arrival and surgery start time. Please make sure you arrive on time

with the person that will take care of you after surgery. The nurse will meet with your caretaker and confirm a contact phone number. **OUR SURGERY SCHEDULE CAN CHANGE DURING THE DAY... PLEASE BE AVAILABLE THE ENTIRE DAY OF SURGERY, SHOULD WE HAVE TO CALL YOU IN EARLY OR HAVE YOU COME LATER THAN YOUR SCHEDULED TIME.**

PLEASE BE PREPARED TO ARRIVE AT OUR OFFICE NO LATER THAN TWO HOURS BEFORE YOUR SCHEDULED SURGERY TIME.

GOING INTO THE OPERATING ROOM

- Your surgery will be performed at our Surgical Center (1841 Iron Point Road, Folsom) in one of our state-of-the-art, fully accredited operating rooms. You will be taken care of by Board Certified Plastic Surgeons, Registered ICU/trauma trained nurses, Board Certified Anesthesiologists from Mercy Hospital in Folsom and a surgical technician.
- When you arrive at our Surgical Center, you will be escorted to the pre-operative holding area. You will be asked to empty your bladder, change into a gown, and place a surgical cap over your hair. The nurse will start your intravenous drip and take your vital signs. Dr. Kaufman or Dr. Davis and the Anesthesiologist will meet with you before surgery. This is the time for final surgical planning. It is also when we will do basic preparation or draw on your skin as needed. There will be time for questions.
- For all women of childbearing age, you will be asked to take a pregnancy test.
- Once you enter the operating room, the staff will do everything they can to make you feel comfortable and secure. For safety purposes, you will be connected to monitoring equipment.

THE RECOVERY ROOM

- Once your surgery is completed and your dressings are in place, you will be moved into our surgical recovery area. You will be re-connected to monitoring equipment. During this time, the nurse will take care of you and remain with you at all times. This is also the time for your caretaker to be with you until you are ready to go home. The nurse will remove your IV and your monitoring equipment when you are ready. She will help you dress and assist you to your vehicle.
- Your stay in the recovery room will last about 45 minutes or longer depending on how soon you are ready to leave. Most patients are fully awake within 30 minutes after surgery.

POST SURGERY ARRANGEMENTS

- **AT HOME:** You must arrange for a responsible adult to bring you to and drive you home from surgery. An adult family member or an adult friend *must* remain with you the first night after surgery.

POST OPERATIVE CARE

- You will be sent home specific post-operative instructions. Please follow those instructions. It is very important that if you have excessive bleeding, excessive swelling, uncontrolled pain and/or fever, you call the office immediately (916-983-9895). Or if you feel you are in a health crisis call 911.
- **YOUR FIRST 24 HOURS:** A responsible adult must stay with you overnight, as you have been sedated.
- **DRESSINGS:** Keep your dressings as clean and dry as possible. Do not remove them unless instructed to do so.
- **ACTIVITY:** Take it easy and pamper yourself. Try to avoid any straining. You may go to the bathroom, sit and watch TV etc. but **NO MATTER HOW GOOD YOU FEEL, DO NOT CLEAN THE HOUSE, OR RE-ARRANGE THE GARAGE, etc.** We do not want you to bleed and cause any more swelling and bruising than is necessary. Your body has undergone major surgery. Don't

compromise your aesthetic goal. Avoid heavy lifting and straining for three (3) weeks minimum. You may however do normal activities at any time if they cause no pain or discomfort. Let your body tell you what you can do or cannot do. Don't overdo it.

- **COLD COMPRESSES:** Ice put directly on your fresh surgery skin can damage the area, so we recommend using cold compresses instead. Cold helps to reduce swelling, bruising and pain. Frozen gel packs work well. You can also use frozen peas in the package or put ice cubes in a bowl of water and wring out a washcloth to place on the surgical area. Please make sure there is at least a thin layer of cloth between cold compresses and your skin.
- **DIET:** If you have any post-operative nausea, carbonated sodas and dry crackers may settle the stomach. If nausea is severe call our office (916-983-9895). If you feel normal, start with liquids and bland foods and if those are well tolerated, progress to your regular diet.
- **SMOKING:** Again, smoking reduces capillary flow in your skin. We advise you not to smoke at all during the first 45 days after surgery.
- **ALCOHOL:** Please do not drink until you have stopped taking the prescription pain pills, as the combination of pain pills and alcohol can be dangerous.
- **DRIVING:** Please do not drive for at least two (2) days after general anesthesia, intravenous sedation, or at any time while taking prescription pain pills. You may drive when driving does not cause pain and you are no longer taking narcotic pain medications.
- **POST-OPERATIVE APPOINTMENTS:** It is very important that you follow the schedule of appointments we established for you after surgery.
- **SURGICAL GARMENTS:** It is imperative you wear your surgical garments as directed. If you do not, your surgical outcome could be jeopardized, and your aesthetic goal compromised.
- **SLEEPING POSITIONS:** During the first week, it is important that you sleep slightly elevated and on your back. After the first week, you will be free to sleep flat and, on your side, as long as it is comfortable.
- **DRESSINGS:** You will be given specific instructions by the nurse regarding your surgical dressings. Please follow them exactly. If you have any questions or issues, call our office to speak with a nurse (916-983-9895).
- **SHOWERING AND BATHING:** You may shower on the 3rd day after your body surgery and 1st day after facial surgery. It is fine to allow your incisions to get wet. Leave the adhesive strips (steri-strips) on your skin. Do not use a bath tub/hot tub until you are completely healed and have been cleared by Dr. Kaufman or Dr. Davis to do so.
- **SUTURES:** Most of your sutures are absorbable and do not need to be removed. However, there are a few that will be removed on your 1 week or 2 week post-operative appointments. Keep them clean and dry.
- **EXPOSURE TO SUNLIGHT:** Scars take at least a year to fade completely. During this time, you must protect them from the sun. Even through a bathing suit, a good deal of sunlight can reach the skin and cause damage. Wear a sunscreen with at least an SPF of 15 at all times when in the sunshine. Cover all incisions with clothing or a band-aid. Tanning beds are never a good idea but if you choose to use them, be sure to protect your scars.
- **ACTIVITIES/SPORTS:** It is important that you avoid straining or any aerobic activity for at least 4-6 weeks after surgery. This is to avoid bleeding, bruising and swelling. Do not resume strenuous exercise until Dr. Kaufman or Dr. Davis clears you to do so. They will increase your activity level according to the progress of your recovery.
- **SEXUAL ACTIVITIES:** Please re-read the Activities/Sports above and apply the same concept to sexual activities.

GENERAL SURGICAL RISKS

- We want you to 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. All of us here at Kaufman & Davis Plastic Surgery will use our expertise and knowledge to avoid complications, as we are able. If a complication does occur, we will use those same skills in an attempt to solve the problem quickly.

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 medication, please call us (916-983-9895) immediately.
- **NUMBNESS:** Sensory nerves to the skin's surface are occasionally cut when an incision is made during surgery—causing a feeling of numbness. However, the sensation does gradually return (usually within 2 or 3 months) as the nerve endings heal spontaneously. Occasionally numbness is permanent.
- **ITCHING:** Itching and occasional small shooting electrical sensations within the skin frequently occur as the nerve endings heal. Ice, skin moisturizers and massages can be helpful if they become bothersome. These symptoms are common during the recovery period.
- **REDNESS OF SCARS:** All new scars are red, dark pink or purple in color. Scars on the face usually fade within 3-6 months. Scars on the breasts or body may take a year or longer to fade. No scars are invisible.

COMMON RISKS

- **HEMATOMA/SEROMA:** Small collections of blood or fluid under the skin, usually 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. Rarely, development of an abscess requires drainage.
- **THICK WIDE DEPRESSED SCARS:** Abnormal scars may occur even though we have used the most modern plastic surgery techniques available. If this is the case, an injection of steroids into the scar, placement of silicone sheathing onto the scar or even scar revision surgery 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.
- **WOUND SEPARATION OR DELAYED HEALING:** Any incision during the healing phase may separate or heal unusually slow for a number of reasons. These include inflammation, infection, decreased circulation, smoking or excess external pressure. If delayed healing occurs, the final outcome is usually not significantly affected, but a secondary revision of the scar may be indicated.
- **SENSITIVITY OR ALLERGY TO DRESSINGS OR TAPE:** Occasionally, allergic or sensitivity reactions may occur from the soaps, ointments, tape or sutures used during or after surgery. Such problems are not typical but are usually mild and easily treated. In extremely rare circumstances, allergic reactions can be severe and require aggressive treatment or even hospitalizations.
- **INJURY TO DEEPER STRUCTURES:** Blood vessels, nerves and muscles may be injured during surgery. The incidences of these injuries are rare.

THIS IS NOT A COMPLETE LIST OF RISKS

RARE COMPLICATIONS

- 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. Failure to disclose all pertinent medical data before surgery may cause serious

problems for you and for the medical team during surgery. If during the post-operative period you feel worried or concerned about anything, please call us and we will arrange to see you promptly or refer you to an appropriate facility.

UNSATISFACTORY RESULT & NEED FOR REVISIONAL SURGERY

- All plastic surgery treatments and operations are performed to improve a condition or a particular part of one's appearance. While most procedures are performed with a very high probability of success, disappointments can occur, and results are not always acceptable to the patient or the surgeon.
- Asymmetry, unhappiness with the result, poor healing, etc. may occur. Minimal differences are usually acceptable. Larger differences may require revision surgery. Rarely problems may occur that are permanent.
- See "Surgical Revision Policy" for further details.

MEDICATIONS

- Dr. Kaufman or Dr. Davis and the nursing staff have given you prescriptions for your comfort and care. It is important that you use the medications as directed unless you experience abnormal symptoms that might be related to medication usage.
- Symptoms such as itching, development of a rash, wheezing, and tightness in the throat would probably be due to an allergy. Sometimes nausea, vomiting and/or abdominal pains occur. Should any of these symptoms occur, discontinue all medications and call our office for instructions.

Common Medicines Containing Aspirin and Nonsteroidal Anti-Inflammatory Drugs (NSAIDs)

Aspirin, nonsteroidal anti-inflammatory drugs (NSAIDs), and excessive amounts of vitamin E can all increase your risk of bleeding. This is especially true during or after an operation or procedure.

Many over-the-counter and prescription medicines contain aspirin or NSAIDs. Below are lists of common medicines containing each of these drugs. While these lists have the most common products, they are not all-inclusive. Please check with your pharmacist or doctor or look on the product label.

All patients anticipating surgery must stop taking all sources of Aspirin and or products containing Aspirin, Ibuprofen, and excessive amounts of Vitamin E, two (2) weeks prior to and one (1) week after surgery. These products are a very strong anticoagulant, which may cause profound bleeding problems in normal individuals.

Avoid these common medicines containing Aspirin--Products in *bold* require a prescription

A/D	Heartline	Soma compound with Codeine tablets
Alka Seltzer	Exedrin extra-strength analgesic tablets & caplets	Pravigard
Anacin	Excedrin Migraine	Rhinocaps
Analgesic Caplets	Gelpirin	Salocol
Arthritis Foundation Pain Reliever	Fiorgen PF	Sine-off sinus medicine tablets-aspirin formula
Arthritis Pain Formula	Fiogestic	Robaxisal tablets
Arthritis Strength Bufferin	Fiortal	Saleto
ASA Enseals	Fiorinal (most formulations)	Roxiprim
ASA Suppositories	Genprin	Sodol

Ascriptin and Ascriptin	Gensan	Soma compound tablets
Aspergum	Headrin	St. Joseph Adult Chewable Aspirin
Asprimox	Isollyl	Supac
Axotal	Lanoprinal	Suprin
Azdone	Lortab ASA tablets	Synalgos DC capsules
Bayer (most formulations)	Magnaprin	Tenol-Plus
BC Powder & Cold formulations	Maximum strength arthritis pain formula by the makers of Anacin Analgesic	Trigesic
Bufferin (most formulations)	Marnal	Tri-pain
Buffets II	Micrainin	Talwin compound
Buffex	Midol	UN-aspirin
Cama Arthritis Pain Reliever	Momentum	Ursinus
COPE	Norgesic Forte (most formulations)	Vanquish Analgesic caplets
Darvon Compound 65	Aspirin	Zee-Seltzer
Dasin	Aspirin Norwich regular strength	Wesprin buffered

STOP TAKING ANY FORM OF DIET PILLS 4 WEEKS PRIOR TO SURGERY

Avoid these non-steroidal anti-inflammatory drugs (NSAIDs) --Products in *bold* require a prescription

Actron caplets	Diclofenac	Lodine	Nuprin
Advil	Etodolac	Meclofenamate	Orudis KT
Advil migraine	Feldene	Mefenamic Acid	Oxaprozin
Aleve	Fenoprofen	Meloxicam	Pedia Care Fever
Altran	Flurbiprofen	Menadol	Piroxicam
Anaprox DS	Genpril	Midol IB	Ponstel
Ansaid	Ibuprin	Mobic	Relafen
Arthrotec	Ibuprofen	Motrin IB	Saleto 200
Bayer Select pain relief formula caplets	Indomethacin	Nabumetone	Sulindac
Children's Motrin	Indocin	Nalfon	Toradol
Clinoril V	Ketoprofen	Naprosyn	Voltaren
Daypro	Ketorolac	Naproxen	

Avoid these Vitamin E products

Amino-Opt-E	E-complex 600
Aquasol E	E-400 IU
Aquavit	E-1000 IU softgels
D'alpha E	Vita Plus E

Medicines to take instead--Products in *bold* require a prescription

You can take acetaminophen and products that contain it. They do not affect your platelets and will not increase your chance of bleeding. Do not take more than 4 grams in one day; very high doses can cause liver damage.

Acephen	Excedrin PM	Talacen
Aceta with Codeine	Fiorcet	Tempra
Acetaminophen with Codeine	Lorcet	Tylenol

Arthritis Pain Formula aspirin -free
Aspirin Free Anacin
Bayer non-aspirin
Datril
Davocet N 100
Di-Gesic
Esgic

Lortab
Naldegescic
Norco
Panadol
Percocet
Repan
Roxicet

Tylenol with Codeine #3
Vanquish
Vicodin
Wygesic
Zydone

Many over the counter herbal medications also cause bleeding and must be discontinued for three weeks prior to surgery. A few of these include:

Cayenne
Echinacea
Ephedra
Feverfew
Fish Oil

Garlic
Ginseng
Ginko
Ginger
Goldenseal

Kava-Kava
Licorice
Saw Palmetto
St. John's Wort
Valerian



Consent for Smokers

It has been known that smokers have a 5%-10% less oxygen carrying ability in their blood due to carbon monoxide bound hemoglobin. In addition, the small air passage in the lungs are irritated and decreased in size by both swelling and phlegm. Smokers' cough caused by this phlegm produces bleeding, swelling, hematoma, and increases bruising during the post-operative period.

The decreased lung function and decreased oxygen carrying ability of the blood can possibly trigger serious complications such as stroke, heart attack, and death.

Due to the nicotine in the blood stream of smokers, it cuts off the nutrient blood supply to skin flaps and results in necrosis (slough) of the skin flaps, scarring, contracture, and deformity. The incidence of skin flaps loss (usually behind the ears) in face lift patients who smoke, is three times higher than in non-smokers. This applies also to breast reduction, breast lift, abdominoplasty and any type of implant or skin flap operations.

The additional risk of the above complications can be decreased in otherwise healthy people by abstaining from smoking/vaping and /or any nicotine-containing substitute (example: nicotine gum) for 45 days before and 45 days after surgery.

Some plastic surgeons will refuse to operate on patients that cannot quit smoking for this period of time. It is your body and you are an informed adult.

Please check one:

- I am going to quit permanently
- I am going to quit completely for 3 months
- Knowing the risks, I am going to continue to smoke

I accept the increased risk of serious complications.

At your pre-operative appointment, an electronic signature will be collected to acknowledge that you received this form and consent to the treatment and/or procedure.



READ CAREFULLY BEFORE SIGNING

CONSENT TO ADMINISTRATION OF ANESTHETICS, AND THE RENDERING OF OTHER SERVICES

I authorize and direct Folsom Anesthesia Medical Group, Inc. or Dr. Ken Harris to perform anesthesia for me and/or to do any other procedure that in his/her judgment may be advisable for my well-being.

Anesthesia involves the use of drugs or medication. The type of anesthesia to be administered has been determined by your surgeon and anesthesiologist to be the most appropriate for you and the procedure that you are undergoing. Not only do different individuals react differently to the same medication, but the state of their physical health influences the action of medicine. While all possible precautions will be taken, unforeseen reactions may occur.

I understand and accept that certain risks and complications are inherent in any anesthetic procedure. Post anesthetic nausea and vomiting, headache, phlebitis (blood clot), sore throat with laryngeal and/or tracheal swelling, heart and lung abnormalities, nerve and/or muscle disorders may occur. No anesthetic procedure, general, local, spinal, epidural, or other, is any guarantee against any post-operative complication. Further, even though steps are taken to protect bridgework, crowned or unsound teeth, there is no guarantee against possible accidental damage. Although rare, there is a risk of death, paralysis, or brain damage associated with the administration of anesthetics.

The nature of the procedure has been explained to me and no warranty or guarantee has been made as to the result.

At your pre-operative appointment, an electronic signature will be collected to acknowledge that you received this form and consent to the treatment and/or procedure.



Surgical Revision Policy

All Plastic Surgery treatments and operations are performed to improve a condition, a problem or appearance. While a majority of procedures are performed with a very high probability of success, disappointments can occur, and results are not always acceptable to patients or the Surgeon. Therefore, secondary procedures or treatments may be indicated. Rarely, problems may occur that are permanent. Poor results such as asymmetry, unhappiness with the result, poor healing, etc. may occur. Minimal differences are usually acceptable. Larger differences may require revision surgery.

Healing is also unpredictable and outcomes from surgery can be outside of your doctors' control. Patients can have acute issues, such as hematomas or seromas (blood or fluid collections), or reactions to adhesives, medications or suture material. Patients can also have long term complications, such as a capsular contracture (hardening of the scar tissue around a breast implant) or poor scarring--just to name a few. We do the best we can, with the latest treatments, to minimize your risk for any complications following your procedure.

There are also serious risks to any surgical procedure, such as a blood clot in the leg or pulmonary embolus. These are emergency situations and need to be addressed at your nearest hospital immediately. Any hospitalizations, treatments, tests, medications or any surgical procedure not done at our facility, are the financial responsibility of the patient.

Aesthetic surgery is both an art and a science, and Dr. Kaufman and Dr. Davis strive to obtain the best possible results for their patients. However, both Drs. Kaufman and Davis can promise only to do the best job they are trained to do. In the event that Dr. Kaufman or Dr. Davis determines that a revision procedure is appropriate, the following policy applies:

Dr. Kaufman or Dr. Davis will provide post-operative care after your initial surgery for a period of up to one year. If it is determined that a revision procedure is appropriate, there will be no charge for the surgeon's professional fees. However, it would be the patient's responsibility to pay for the operating room, anesthesia services, supplies, diagnostic tests, and any pre or post-operative prescriptions or non-prescription medications. The minimum fee for a revision under local anesthesia is \$500. The minimum fee for a revision under general anesthesia is \$1,800.00. Facility and anesthesia fees are based on time. It is not uncommon for Dr. Kaufman or Dr. Davis to have the patient wait one year for the healing process to complete in order to determine if a revision will be necessary.

At your pre-operative appointment, an electronic signature will be collected to acknowledge that you received this form and consent to the treatment and/or procedure.