

# MEDILASER

COSMETIC SURGERY AND VEIN CENTER  
3110 W. Main Street, Suite 150, Frisco, Texas 75033  
Ph: 469-362-8665 Fax: 469-362-8085

## CONSENT FOR LIP AUGMENTATION WITH SILICONE IMPLANTS(S)

I, \_\_\_\_\_ hereby request and authorize Dr. Mauricio Giraldo to perform upon me a surgical operation known as a lip augmentation with a solid silicone implant. A shaped soft, flexible, sterile, medical-grade, custom fit silicone implant is used for augmentation of the lips. The implant is FDA approved for the face, but it will be used of the lips, i.e. an "off label" use. Off label use permits a physician to use a material that is FDA approved for purpose that is not specifically FDA approved.

This procedure has been explained to me, and I completely understand the nature and consequences of the procedure. The purpose of the procedure is to increase the fullness of the lip (s) by making a small incision in each corner of the mouth; Dr. Giraldo makes a tunnel through the lip (s), extending from one side to the other, into which the implant is inserted.

I understand that in addition to the general complications of surgery, such as death, hematoma, pneumonia, heart attack, stroke, bleeding, and blood clots in the leg veins rising up to and damaging the lungs, there may also be complications specific to this procedure. Complications from this/these procedure(s) may include but are not limited to:

- Dissatisfaction with symmetry, size, and shape of the lips. Wrinkling and rippling of implants is unusual but possible. With thin skin and little subcutaneous tissue, these wrinkles can show through.
- Abnormal contour of the lip (s), extrusion (implant breaks through sutures), visible edge of implant, or shifting of implant.
- Swelling for an indeterminate period. Much of the swelling will normally disappear in 2-3 weeks and the remainder may require several months.
- Bruising may persist for 1-2 weeks.
- Nerves are stretched out and persistent numbness, burning, or tingling can occur. Damage of the nerves can cause temporary or persistent lip and jaw pain. In rare occasions, permanent areas of numbness may persist.
- Allergic or other unfavorable reactions to one or more of the substances used in the operation.
- The life span of an implant is not known, and ultimately, all implants will fail. Since there is no fill or gel a broken implant would only need to be changed if there was a visible change. Fees for replacement will be my responsibility.
- Scar tissue normally forms around all implants. Occasionally, capsule contracts cause unusual firmness of the lip. The contracted capsule can become painful and calcium deposits may form on the capsule. If so, additional surgery is recommended to improve the results.
- Implant placement is along the upper edge of the lip; it can become displaced or infected early on.
- I understand that silicone implants have been in use for more than 30 years, but the actual life span of the implant is unknown. The actual fate of the silicone and silicone breakdown products is unknown and could persist even after the implants were removed.
- It is not known if implants will have any genetic effects on the developing fetus or affect the nursing infant through the milk.
- The future removal of my implants will not return my lip to their present condition. There might be psychological depression about my stretched skin.

For **women of child bearing age**: To the best of my knowledge, I am not currently pregnant. **Since anesthesia can be harmful to the fetus**, if there is a chance I might be pregnant at the time of surgery, it is **my responsibility** to inform Dr. Giraldo.

It must be recognized that medicine and surgery are not exact sciences. I understand there is no guarantee of results of any treatment.

*Rewrite the following:* "I understand that the practice of medicine is not an exact science and although good results are expected, there can be no guarantee as to the results." \_\_\_\_\_

"I will not drive while on narcotic pain medications or sedative drugs prescribed by my cosmetic surgeon." \_\_\_\_\_

I acknowledge and give consent to pre-operative and post-operative digital photography. This digital photography may be used for the purpose of patient chart documentation, scientific presentations, patient awareness and education, or digital photography on the website of Medilaser, Cosmetic Surgery and Vein Center.

I understand the regular charge applies to all subsequent treatments. In some situations, it may be possible to I understand and agree that all services rendered to me are charged directly to me and that I am personally responsible for payment. I further agree in the event of non-payment, to bear the cost of collection, and/or court cost and reasonable legal fees, should this be required.

I have read the above request and fully understand it. I acknowledge that I have been advised as to alternative methods of treatment, have been given an opportunity to ask all questions regarding the treatment to be administered and am satisfied that I have been fully informed and understand the procedures.

Patient Signature \_\_\_\_\_ Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Witness \_\_\_\_\_ Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

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*Read these BEFORE the surgery before you are medicated. Get your responsible caretaker to read them. They will be doing the care.*

## PRE-OPERATIVE INSTRUCTIONS

- 1) **BRING YOUR MEDICATIONS TO SURGERY!** Start your **anti-viral** and **antibiotic** medication **1 day prior** to and take **anti-nausea** medication right **before leaving** for surgery.
  - ANTIVIRAL: **Acyclovir** or **Valtrex**
  - ANTIBIOTIC: **Cipro** or **Keflex** or **Bactrim**
  - ANTI-NAUSEA: **Phenergan/Promethazine** [Take 30 minutes prior to Hydrocodone]
  - PAIN: **Hydrocodone-Acetaminophen 10/325**
  - ANTI-ANXIETY: **Ativan/Lorazepam**
- 2) **DO NOT TAKE ASPIRIN, PLAVIX, IBUPROFEN, MOTRIN, ALLEVE, ADVIL, BUFFERIN, ANACIN, ANACIN-FREE, EXCEDRIN** or products containing aspirin, other NSAIDS (non-steroidal anti-inflammatory medications), Vitamin E, diet pills, fish oil, herbal medication, herbal or green tea, ginkgo, ginseng or garlic pills, for two weeks prior to surgery. Aspirin and some NSAIDS can thin your blood, so you do not clot and could increase your tendency to bleed at the time of surgery and during the post-operative period. It is very important not to stop drugs that interfere with platelets, such as Plavix, which is used after a stent. It is important if you have had a stent and are taking Plavix that you inform the surgeon. Stopping Plavix may result in a heart attack, stroke and even death. Be sure to check with your physician about any drug interactions that may exist with medications which you are already taking. If you have an adverse reaction, stop the drugs immediately and call your surgeon for further instructions. You may take Tylenol (acetaminophen) for pain.
- 3) **CLEANSE FACE PRIOR TO SURGERY.** Do not wear make-up or facial moisturizers to the office the day of surgery.
- 4) **DO NOT SMOKE** for two weeks prior to surgery. Smoking decreases your circulation and slows down healing time which may result in bad scarring.
- 5) **SUPPLIES TO HAVE READY FOR AFTER YOUR LIP AUGMENTATION:**
  - Prescriptions: pain, antibiotics, and antiviral medication
  - Small tube of Bacitracin or Neosporin ointment
  - Q-tips
  - Small bottle of Hydrogen Peroxide
  - Ice pack
  - Vaseline, Carmex or Chapstick to keep lips moist
  - Small children's toothbrush

## POST OPERATIVE INSTRUCTIONS

- 1) Rest quietly the rest of your surgery day. The next day you can perform routine activities. No exercise for 1-2 weeks.
- 2) Sleep on your back with head elevated using 3-4 pillows for at least 7 days to minimize swelling.
- 3) No bending over, lifting or straining for 3-4 days.
- 4) Eat soft foods that require minimal chewing. No hot or salty foods or fluids for 48 hours. Drink plenty of clear fluids.
- 5) **NO SMOKING** for at least two weeks after surgery. Smoking will inhibit your healing process.
- 6) **AVOID** opening the mouth wide to prevent incision site separation (opening.)
- 7) Brush your teeth and rinse your mouth after meals.
- 8) Clean incisions at corner of mouth with diluted hydrogen peroxide (½ hydrogen peroxide, ½ water) then apply antibiotic ointment (Neosporin, Polysporin) 3 times per day.
- 9) Use cool compresses for 24-48 hours to reduce swelling. **NO DIRECT ICE.**
- 10) Keep lips moisturized for 2-3 weeks with Vaseline, Carmex or Chapstick.
- 11) You will be taking medications that will sedate you and will need to arrange for someone to drive you home following the procedure. Do not drive for at least 2 days after surgery or while taking prescription pain medication that may affect you or make you drowsy.

### 1 WEEK POST SURGERY APPOINTMENT

- Verify that the implant remains centered. Gently feeling the tapered ends of the implant are in the same position on each side, top and bottom.

### 2 WEEK POST SURGERY APPOINTMENT

- Discuss stretching exercises: Should be performed 2-3 times a day for 2-3 months to help alleviate excessive scar tissue formation. Stretching exercises are to be started when sutures are gone and incisions have healed (usually by 2 ½ -3 weeks post-op.)  
Examples of stretching exercises will include: 1. Opening mouth widely.  
2. Excessive smiling (pulling lips tightly against teeth.)

*I have read and understand the above information: Initials\_\_\_\_\_*