

THE NADERI CENTER FOR COSMETIC SURGERY & SKIN CARE, PLLC

Patient Name: _____

Today's Date: _____

Important General Surgical Risks

COMMON SYMPTOMS

Swelling and Bruising, Discomfort and Pain, Crusting Along the Incision Lines, Numbness, Itching, and Tingling, Nausea, Slight Bleeding, Changes in Smell and Nasal Drainage, Redness of Scars.

**** Some of these normal symptoms can also occur with infection or allergic reaction so always check with us when in doubt.*

COMMON RISKS

Hematoma; Bleeding; Inflammation and Infection; Thick, Wide, or Depressed Scars; Wound Separation or Delayed Healing; Sensitivity or Allergy to Dressings or Tape; Increased Risks for Smokers; Injury to Deeper Structures; Asymetric healing.

RARER 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 and medications before surgery may cause serious or fatal problems.

UNSATISFACTORY RESULTS & POSSIBLE NEED FOR REVISION SURGERY

All Cosmetic 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 may occur and results are not always acceptable to patients or the surgeon. Secondary procedures or treatments may be indicated. Occasionally, problems may occur that are permanent.

Possible Unsatisfactory Results: Asymmetry, unhappiness with the result, poor healing, etc. may occur. Minimal differences and asymmetries are usually acceptable and part of normal healing and human visage. Larger differences may require revision surgery.

_____ I understand that significant improvement is the goal but "perfect results" are subjective and often unrealistic.

_____ I understand that while symmetry is the goal, perfect symmetry is unrealistic.

_____ I understand that the healing process is different for each patient and it is out of Dr. Naderi's control.

_____ I understand that the goals of the surgery are improvement, not perfection.

_____ I understand that complete healing may take months to years and I have to be patient and occasionally minor touch-ups may be needed to account for variable healing.

_____ I understand that satisfaction and happiness with surgical results is subjective.

Signature: _____

Date: _____