

## **BREAST AUGMENTATION**

You and your doctor are considering an operation to increase the size and/or position of one or both of your breasts. The operation requires surgical cuts in the breasts or in the armpit, or abdominal areas. Today most patients have breast implants inserted into the breast through these surgical cuts. There are many kinds of implants, but they all have one thing in common: they are foreign materials which are not ordinarily found in the human body. Complications from breast augmentation are uncommon but they sometimes occur. It is possible that your appearance will be less pleasing after the surgery from it was prior to it. Because of these facts your doctor can make no guarantee as to the results of benefits that might be obtained from this operation.

**Some of the possible complications of breast augmentation are:**

Bleeding, infection, fluid collections in the breasts, leaking of implant contents into surrounding tissue, hardness of the breasts, decreased nipple sensation.

The milk production of the breasts, persistent swelling and congestion of the breasts, erosion and damage to the skin of the breasts, lack of symmetry of the breasts (they don't look alike), personality changes and mental difficulties following the surgery. Sometimes occurring even when there is good cosmetic result, and allergic or other bad reactions to the implant or one or more to the substances used during the course of the procedure. The use of silicone implants has been suspected in cases of collagen vascular disease.

Some of the complications of breast augmentation can cause the need for more surgery and the removal of the breast implants, some of the complications can cause permanent deformity, painful and unsightly scarring, and prolonged it.

Illness, very rarely, some of the complications can even cause death. Also, although medical studies up to this point indicate that breast implants are safe, it may be several years before an absolute conclusion can be made that these implants do not cause cancer. Breast implants may interfere with early detection of tumors by mammography. Rarely, mammography can damage breast implants.

**ADDITIONAL RISKS AND ALTERNATIVES:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CERTIFY: I have read or had read to me the contents of this form. I understand the risks and alternatives involved in this procedure. I have had the opportunity to ask questions which I had all of my questions have been answered.**

**Date:** \_\_\_\_\_ **Time:** \_\_\_\_\_ **Signed:** \_\_\_\_\_

**Witness:** \_\_\_\_\_ **Physician:** \_\_\_\_\_

## Information and Instruction Packet Prepared for

Patient

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Scheduled for a Breast Augmentation Operation at

\_\_\_\_\_ On

\_\_\_\_\_, at \_\_\_\_\_ AM/PM

Please report at \_\_\_\_\_ AM

## About Breast Augmentation

In our society today, it is extremely important for us to feel good about the way we look. For this reason many women are considering cosmetic surgery to make themselves feel better about themselves and to make them look better in their clothes.

You are considering breast augmentation surgery. This is a very common procedure, which is performed thousands of times every day across the United States. The procedure consists of making a pocket underneath the breast, between the backside of the breast and the front of the chest. We pay meticulous attention to the shape of this pocket since we try to make the breast look natural. The goal is to give a truly natural contour to the breast and the chest. With implantation, we can also incorporate procedures for elevating the breasts.

We usually make the incision under the breast or around the areola area of the nipple.

## Commonly asked questions

Can the breast prosthesis be broken? The material is very elastic and easily stretched, thus it is difficult to break the implant. Patients have been victims of blunt trauma to the chest sufficient enough to fracture their ribs, yet did not rupture the prosthesis. This does not imply that they absolutely cannot be broken, but it would take a considerable force to break an implant. If in the unlikely event it did break, it would have to be replaced.

Does flying effect breast implants? Flying does not affect the implants. Many stewardesses have implants and fly almost every day.

Can one breast-feed if she has implants? You would be able to breast-feed but it is not recommended. Theoretically, there might be an increased possibility of developing mastitis (infection in the milk ducts). Repeated engorgement and relaxation can produce a lasting sagging or drooping of the breast. However, if you really feel you want to breast feed, you may do so with the above facts in mind.

Are patients put to sleep for this surgery? This is a decision between the patients and the surgeon.

Why do some breast implants develop firmness? An unusually thick capsule of scar tissue that forms around the implant causes the firmness. Some scarring is expected and necessary to maintain the position of implant. Some people form thicker scars than others

do. The newer implants seem to cause less scar formation. Sometimes it is advisable to manually break up the capsule of scar tissue. Rarely does an implant have to be replaced.

Does the surgery require a special bra? Yes. It can be purchased from Dr. Roham's office. It is designed to give good support, closes in the front, and has no seams across the cups. This special bra is worn most of the time for about 2 months. No under-wire bras should be worn, except on an occasional "night out".

Can a person go bra-less after breast implants are placed? Certainly, if inclined to do so. However, a bra should be worn during jogging; running, tennis, horseback riding, and any other time the breast might get jostled.

Can breast implants cause breast cancer? It is our opinion at this time, based on many studies, that breast augmentation does not cause cancer of the breast. An augmentation will not prevent cancer from developing.

Can breast lumps be detected if one has implants? When implants are present, breast lumps can be felt more easily since the breast tissue is being pushed forward, stretching the skin and subcutaneous fat and making the lump less elusive. Mammograms are more difficult to interpret after augmentation but can be supplemented with ultrasound when necessary. It is still important to get mammograms regularly after age 40. Any lump that develops needs to be diagnosed. Most breast lumps are benign.

If you have other questions and concerns, be sure to ask Dr. Roham about them.

### **The Admitting Process**

A nurse will take a brief nursing history and will take your vital signs. Remind the nurse of any drug allergies you have.

Dr. Roham will meet you there for the final planning and, if necessary, will mark your skin with a special pencil.

An intravenous line may be placed in a vein in your forearm for administration of antibiotics and other medications.

Your anesthesiologist may also meet with you.

### **Anesthesia and Sedation**

Monitored anesthesia care (MAC) ~ MAC is used with local anesthesia. An anesthesiologist constantly monitors your heart rate and function, blood pressure, breathing, blood oxygen saturation, and give you intravenous sedatives to keep you comfortable and in a twilight state. You usually recover from the sedation within an hour or two. The anesthesiologist will determine if this is the best method of anesthesia for

you. You should not operate a vehicle or dangerous machinery for at least 24 to 48 hours after your anesthetic.

### **The Operating Room**

The operating room is where the operating procedure will take place. This is a very clean room, especially designed for your safety. The staff will be wearing caps, masks and those directly involved in the surgery will have on sterile gowns. Every effort is taken to keep the operation areas, where incisions will be made, aseptic and free of contamination. Extreme effort is taken to protect you from germs that cause infection.

You will be connected to instruments that monitor your heart action, blood pressure, and blood oxygen saturation. These are used to help ensure your safety.

You will become drowsy from medicine given directly into your vein. You will be given anesthesia appropriate for your surgery.

The time spent in surgery will depend upon the extent of your surgery. Dressings will be applied and you will go to the post-operative recovery room.

### **The Recovery Room**

The recovery room is a specially equipped room where you will usually stay for thirty to sixty minutes, or longer if necessary, until you are awake and stable.

Because of the effects of medication, you may not remember your stay in the recovery room.

### **After the Recovery**

You will return to your admission room and be prepared to go home.

A responsible person must remain with you the first 24 hours following your surgery home because you will still be under the effects of sedation.

### **Post-Operative Care at Home**

Problems: If you experience excessive bleeding (other than minimal oozing through your dressing), pain, bladder problems, or other troubling problems, call Dr. Roham's office at 949-248-1900, day or night for assistance.

Immediate results: Swelling and discoloration are normal following breast augmentation surgery. The degree varies from person to person. The following instructions are designed to minimize discomfort after surgery.

**Dressings and wound care:** Keep your dressings as clean as possible. You may remove those 24 hours after surgery to shower, unless you have been instructed not to do so. If you have tape strips, try to keep them dry for 48 hours. If they get wet, dry them with a hair dryer or pat them dry. They must remain on for 2 weeks. If you have stitches instead of Steri-strips, clean suture line with hydrogen peroxide and water. Apply a light coating of Bacitracin ointment to the incision twice a day. Sutures, will be removed in 7 days.

**Special brassiere:** You will go home with a special brassiere. This is designed to support the breast until it is fixed in place by normal body healing. It may be removed for laundering. You may remove it to shower, you also may use a regular brassier, without “under-wires”, when dressing up to go out for special occasions. It is necessary to wear this brassier 24 hours a day for one month. You need to wear it at least 16 hours a day the second month. Absolutely no “under-wires” for 3 months. Dr. Roham will advise you if you need to continue wearing the bra.

**Ice packs:** It is helpful to apply an ice pack to your wounds the first 48 hours. This helps to keep swelling down and will also help minimize the bruising and pain. You may make an ice pack by placing ice cubes in a plastic zip bag and wrapping it in a light towel. Apply for fifteen minutes at a time or until it becomes uncomfortable.

**Activity:** Your activity should be restricted the first 24 hours. You may lie, sit and walk around the house as much as you like. Do not do any strenuous activity, no matter how good you feel. Straining and physical activity may start up bleeding and cause swelling and bruising, which will make you more uncomfortable and will delay healing. Vigorous activities should be restricted for 2 weeks. Do not raise your arms up or back for 3 weeks. Do not swim, use a Jacuzzi, or soak in a tub with breasts under the water for 6 weeks.

**Other physical restrictions:** No water or snow skiing, racquetball, tennis, or bowling for 2 months following surgery.

**DIET:** It is important to eat a well balanced diet after surgery as it promotes healing. If nauseated after surgery, start with clear or carbonated liquids and dry crackers. Advance to more solid foods as tolerated. If severely nauseated, use the prescribed rectal suppository for nausea, inserted into your rectum. If you do not have a suppository, call 949-248-1900. Drink 6 to 8 glasses of water per day for the first three days in addition to tea, soda or coffee if desired. A low salt diet is also helpful.

It is strongly recommended that you do not smoke. If you are a smoker and elect to smoke, please refrain for 10 days. Do not use nicotine patches, gum, etc.

Do not use alcoholic beverages until after 48 hours and after you have discontinued all prescribed pain medication. Alcohol causes blood vessels to dilate and could contribute to bleeding and can be dangerous combined with pain medication.

Do not drive for at least 2 days after intravenous sedation. It is best to get driving advice from Dr. Roham before your surgery or before you leave the center.

It is important to keep all of your planned post-operative office appointments. Your first post-operative visit will occur the day after your breast augmentation.

Do not expose the breast to sun or tanning beds for 3 months.

## WHAT TO EXPECT

**Swelling and bruising and lumpiness:** Some swelling and bruising is to be expected. It will decrease with time. Rely on your surgeon to tell you how you are progressing. Only surgeons who do this work have the knowledge and experience to evaluate your progress.

**Healing:** Following the instructions you have been given will facilitate your healing. Healing rate varies for numerous reasons: genetics, diet, state of nutrition, state of health, age, smoking history, physical strength, etc. Your surgeon does not heal you, but his advice is helpful.

**Wound complications:** Wound complications are rare and usually not the fault of anyone. They occur because of the nature of the human body and its environment. Your surgeon takes extreme care to use surgical techniques that are designed and proven to limit wound complications to a minimum.

**Infection:** Skin cannot be completely sterilized and skin bacteria always contaminate incisions and wounds to some degree. Cleansing the skin with modern anti-bacterial skin cleansers usually decreases the number of bacterial organisms to such a low concentration that the body is able to overcome the exposure. You are also given antibiotics to help your body defenses successfully fight off the invading bacteria. Nevertheless, infection is always possible. Infection will usually require antibiotic treatment and if an abscess develops, it may have to be drained, or in extreme infections, the amplitude. Minor crusting along the incision can be washed away and treated with antibiotic ointment. **IF THE IMPLANTS WOULD HAPPEN TO BECOME INFECTED AND THE INFECTION CANNOT BE CONTROLLED THEN THE IMPLANTS WILL HAVE TO BE REMOVED.**

**Bruising and hematomas:** Some bruising and swelling is expected. Small hematomas will be absorbed. Large ones may have to be aspirated or drained. If not too large this can be accomplished in the office. When quite large, you may need to be taken to the operating room.

**Scars:** Incisions will be red, pink, or reddish purple for 3 to 6 months and will generally fade out. Some people, for genetic or inherited reasons, may develop thick, wide, depressed or elevated scars. Your previous experience with scars should be a tip off about how you will heal. These unusual scars may warrant additional treatment, such as: injection of steroids into the scar; fat transfer or injection; placement of silicone sheeting into the scars; or further plastic surgery.

Post-operative asymmetry: Breasts are never exactly the same size before augmentation and probably will not be after augmentation. Every effort is made to try and get them close to the same size and contour. Early on, some asymmetry may occur from edema or swelling.

There is a possibility of visible wrinkling of the saline implants. In approximately 8 to 9% of patients there may be slight wrinkling of the textured implants. This is a trade off to prevent hardness. By placing them under the muscle there is a less chance of wrinkling.

Medical complications: Complications not related to the actual breast augmentation can occur and are unpredictable. These include, but are not limited to: severe drug allergic reactions; blood clots and pulmonary emboli, which can be serious and even fatal; cardiac irregularities (arrhythmias); heart attacks; and hypothermia (low body temperature). Nurses will attend to you who are especially trained to manage these complications. This reduces the risk as much as possible. Please disclose all pertinent medical data pre-operatively when your history is taken.

NERVES: Because the nerves are cut during surgery, they may not grow back exactly to their original form. They recover at different rates and some may not recover, leaving areas of decreased sensation and those of exquisite sensation even to the slightest touch. It takes up to 6 to 18 months for nerves to show appreciable recovery.

I (we) realize that common to surgical, medical and/or diagnostic procedures is the potential for infection, blood clots in veins and lungs, hemorrhage, allergic reactions, and even death. I (we) also realize that the following risks and hazards may occur in connection with this particular procedure:

(1) Abnormal scarring (2) contracture of fibrous capsules around implants with hardness abnormal shape (3) hematoma, possibly requiring drainage (4) changes in the sensation of the breasts (5) displacement of implants (6) palpable and/or visible implants (7) rupture of implants (8) atrophy and/or ulceration of skin over implants (9) asymmetry of nipples and/or breasts.

Patient's name:

Patient's signature:

Date: \_\_\_\_\_ Witness: \_\_\_\_\_

## CONSENT FOR SURGERY

You have the right, as a patient, to be informed about your condition and the recommended surgical, medical, or diagnostic procedure/s to be used so that you may make the decision whether or not to undergo the procedure, after knowing the risks and



hazards involved. This disclosure is not meant to scare or alarm you. It is simply an effort to make you better informed so you may give or withhold your consent to the procedure.

Patient Initials

I \_\_\_\_\_ hereby give my permission for Dr. Tim Roham and such assistants as may be requested by him, to perform the elective surgery of: Breast Augmentation. This is an operative procedure whereby implants are placed between the breast tissue and chest wall and under the muscle to improve the appearance of my body by enhancing the contour of my breasts and chest.

Patient Initials

I have read, or had read to me, the attached pages of information explaining the procedure. I have also discussed with Dr. Roham, in consultation, and to my satisfaction, the nature of the operation, treatment risks, complications, and what to expect from the surgery

Patient Initials

I have been made aware that any surgical operation involves general risks, including, but not limited to those discussed in the information packet given me, i.e.: bleeding, infection, nerve or tissue damage, paralysis, brain damage, cardiac arrest, pulmonary complications, drug reactions, and even death.

Patient Initials

I understand that an anesthetic will be administered and that it too carries some risk. I consent to the administration of an anesthetic by an anesthesiologist designated by Dr. Roham

Patient Initials

It has been explained to me, that during the course of breast augmentation, unforeseen conditions and circumstances may be discovered or revealed that necessitates an extension of the original planned procedure, or may require additional or different procedures than those planned. I hereby authorize Dr. Roham and/or his designated assistants to perform such procedures as are necessary or desirable, including but not limited to the services of pathologist, radiologists, cardiologists, or a laboratory. The authority granted in this paragraph shall extend to remedying conditions that are not known to Dr. Roham at the time of the operation.

Patient Initials

I agree to keep Doctor Roham's office informed of any change in my permanent address so that his staff can inform me of any important new findings related to my surgery. I further agree to cooperate with him in my aftercare until I am discharged from his care.

Patient Initials

In signing this consent, I hereby certify that I understand the risks, benefits, and alternatives to my operation and that I have discussed them with Dr. Tim Roham. I have also completed all blank spaces.

Patient Initials

I do hereby acknowledge that Dr. Tim Roham has fully informed me of the above procedure as well as providing me with this packet of information and he has gone through this packet of information with me and I fully understand all. By initialing and signing this form I recognize and acknowledge that I fully understand and that Dr. Roham has discussed the content of this packet of information with me. I also am aware that the practice of medicine and surgery and in particular cosmetic surgery is not an exact science. I acknowledge that due to the nature of this operation or procedure an exact end result cannot be predicted and that Dr. Roham has made no guarantees or promises of a specific result from this operation or procedure.

Patient Initials

#### PHOTOGRAPH CONSENT FORM

I hereby consent that any and all photographs taken or ordered by Dr. Tim Roham, of any part of my body, whether originals or reproductions, taken pre-operative and post-operative, may be utilized for such purposes as he may desire in connection with his research, writing, professional activities, and may be used, exhibited and published through any medium whatsoever as part of or in connection with his research, writing and professional activities, even though such use may be for advertising purposes or purposes of trade. I also understand that there is no time limit associated with this consent. I may retract this consent by written signature. I certify that I have read and understand the aforementioned and sign my name below giving consent to the foregoing.

Patient's signature:

#### FINANCIAL POLICIES

Cosmetic surgery is usually not covered by insurance, unless there is a medical indication for the surgery. We will make every effort in advance to try and determine if your insurance benefits will pay any of the charges for your surgery. We will also assist you in collecting your maximum benefits.

Dr. Roham's fee does not include hospital, operating room, and ambulatory surgery center, x-ray, laboratory, anesthesia, extra garments or FUTURE SURGERY CHARGES.

You are required to pay a \$500 deposit to hold your surgery date. If you must postpone your surgery, please let Dr. Roham's office know as soon as possible. If the surgery is canceled ten (10) business days or less before the scheduled surgery, all of your money minus the \$500 scheduling fee will be returned unless you reschedule the surgery within 30 days of the date you cancelled the surgery.

Patient's signature:

ADDITIONAL SURGERY REGARDING/FOLLOWING YOUR  
BREAST AUGMENTATION PROCEDURE

I \_\_\_\_\_ hereby understand that although not anticipated it is a possibility that a secondary procedure, touch-up procedure or additional surgery may be required.

Secondary procedures, touch-ups, additional surgery, removal of excess skin, replacements, scar revisions, etc., are rig~ a part of the initial surgery fee. These additional procedures may or will require a hospital or facility fee, anesthesia fee, garment fees and surgeon's fee, etc.

I certify that I have read and understand the above authorization and sign my name below indicating that I am fully informed.

Patient signature:

I \_\_\_\_\_ hereby understand that although not anticipated it is a possibility that a secondary procedure, touch-up procedure or additional surgery may be required.

Secondary procedures, touch-ups, additional surgery, removal of excess skin, replacements, scar revisions, etc., are rig~ a part of the initial surgery fee. These additional procedures may or will require a hospital or facility fee, anesthesia fee, garment fees and surgeon's fee, etc.

I certify that I have read and understand the above authorization and sign my name below indicating that I am fully informed.

Patient signature:

\_\_\_\_\_ I am not a smoker, but I was still informed of the risks explained to me by Tim Roham DO. that smoking complicates wound healing.

Patient signature:

\_\_\_\_\_ I am a smoker

I have had the risks explained to me by Tim Roham DO., that smoking complicates wound healing. I agree to stop/quit smoking 10 days prior to my surgical procedure and to not use nicotine patches, gum etc. I also agree to stop/quit smoking until three weeks following my surgical procedure. If I am unable to do this, I realize this places an increased risk to my healing process following surgery. This has been well explained to me.

Patient signature:

#### LIST OF POTENTIAL SURGERY COMPLICATIONS

1. Bleeding
2. Infection
3. Anesthetic reaction
4. Swelling
5. Pain
6. Ecchymosis (black & blue bruising)
7. Dehiscence of skin (opening or separation of wound)
8. Scarring
9. Asymmetry
10. Hematomas
11. Change in nipple sensitivity (increased, decreased or lost)
12. Loss of ability to breast feed in future
13. Necrosis or loss of nipple tissue
14. Capsular contracture (thickening of capsules around implants.
15. Implant deflation
16. Implant rupture
17. Stretch marks
18. Rippling
19. Mammogram changes
20. HIV Antibody
21. Hypothermia
22. Heart attack
23. Pulmonary embolism
24. Allergic reaction
25. Blood clot
26. Abscess

Patient signature: \_\_\_\_\_

HERBAL MEDICINES AND SUPPLEMENTS  
POTENTIAL HAZARDS FOR SURGICAL PATIENTS

It has been reported that herbal medicines and supplements can cause increased bleeding or interfere with anesthetic agents potentially causing complications during and after surgery.

I hereby understand that I am to stop all herbal medicines and/or supplements at least two (2) weeks prior to any surgical procedure. If I have questions about any herbal medication and/or supplement I am to contact Dr. Tim Roham for instructions.

PATIENT SIGNATURE

DATE \_\_\_\_\_

CONSENT TO 24 HOUR POST-OPERATIVE  
CARE FOLLOWING SURGICAL PROCEDURE

I \_\_\_\_\_ hereby understand that when I have been given IV sedation, anesthesia etc., that I am to have someone take me home after the surgical procedure because I cannot drive for at least the first 48 hours following the procedure. I am also aware that someone is to be with me at all times for the first 24 hours following my surgical procedure.

I am aware my surgical procedure will be cancelled if I do not have an adult (over the age of 18) who is willing to assume the responsibility of staying with me for the first 24 hours following my surgical procedure.

Patient Name: \_\_\_\_\_

Patient signature: \_\_\_\_\_

Date: \_\_\_\_\_ Witness: \_\_\_\_\_

## **Preventing and Treating Capsular Contracture**

The most common negative side effect of breast augmentation is hardening of the breast (capsular contracture). It occurs to some degree in up to 25% of all breast augmentation patients; this is why it is so important for you to be aware of the problem. Signs of hardening of the breast include:

- Progressive stiffening of the breast
- Persistent or increasing pain of the breast
- Changes in the shape of the breast (most commonly an upwards movement)

While we cannot guarantee the prevention of capsular contracture, we do know that the following preventative measures can help avoid or even treat the condition:

- It is VERY IMPORTANT for patients to massage their breasts 5-6 times a day starting two weeks after surgery.
- Patients are also encouraged to sleep on their breasts for an hour or more per day after surgery.

Patients are also encouraged to take the following medications beginning two weeks after surgery:

1. 400 mg of Vitamin E daily. This is an OTC (over the counter) vitamin supplement that can be bought at any drugstore.
2. OTC Anti-inflammatory medications like aspirin or ibuprofen (Advil, Nuprin, Motrin, Aleve, etc.)

If there are definite signs of capsular contracture, patients should contact the office and obtain a prescription for Accolade. This is a prescription medication generally used to treat asthma; however research shows that it can help alleviate hardening of the breast associated with capsular contracture.