

**Procedure: ABDOMINOPLASTY**

You and your doctor are considering an operation to remove fatty tissue and skin from your abdomen or stomach. The operation is called an Abdominoplasty and it is usually performed on excessive fatty tissue in the abdomen or belly. The operation involves cutting away of the excessive fatty tissue and skin. This operation is not an emergency, nor is it usually necessary to protect the physical health of the patient, although it may make the patient feel more comfortable. Complications from Abdominoplasty operations are uncommon, but they do sometimes occur. It is possible that this operation will not help you. It is even possible that you will be worse after the operation than you are right now. Because of these facts your doctor can make no guarantee as to the results that might be obtained from this operation.

Some of the possible complications of Abdominoplasty are:

Bleeding; infection; fluid collections underneath the skin; excessive scarring; inadequate or excessive amounts of tissue removal; skin sloughing (skin death); wound disruption; abnormal position of the umbilicus or belly button; nerve damage causing numbness or tingling in areas of the stomach; blood clots in the legs and lungs; personality changes and mental difficulties following the surgery, sometimes occurring even when the operation has been otherwise successful; and allergic or other bad reactions to one or more of the substances used in the course of the procedure.

Some of the complications of Abdominoplasty may cause the need for further surgery; some of the complications can cause prolonged illness, poor healing wounds, unsightly and painful scars, and permanent disability; very rarely, some of the complications can even cause death. Furthermore there are alternatives to this operation available to you, such as liposuction, delaying the surgery, using supports, and possibly losing weight.

ADDITIONAL RISKS AND ALTERNATIVES: \_\_\_\_\_  
(To be filled in here and on reverse side by \_\_\_\_\_  
Doctor as necessary)

I 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 any questions which I had and all of my questions have been answered.

DATE: \_\_\_\_\_ TIME: \_\_\_\_\_

SIGNED: \_\_\_\_\_

(Signed by patient or person legally authorized to consent for patient)

WITNESS: \_\_\_\_\_

PHYSICIAN: \_\_\_\_\_

(A GENERAL CONSENT FORM MUST SIGNED BY THE PATIENT)

(Signed by Physician)

**DO NOT TAKE ANY ASPIRIN OR MEDICATIONS THAT CONTAIN ASPIRIN FOR 2 WEEKS PRIOR TO SURGERY AND FOR 2 WEEKS AFTER SURGERY.**

### **Instructions for Abdominal Dermolipectomy**

#### **BEFORE SURGERY**

The night before and morning of surgery, wash the entire abdomen, including the recesses of the navel and the pubic hair with the anti-bacterial soap (Dial, Safeguard, Phisophex, Phase III, Hibiclens) for 5 minutes each times.

On day prior to surgery, shave all excessive hair from the abdomen and shave a 1 inch strip of hair from the upper pubic area.

Have nothing to eat or drink on the morning of surgery, except for a small amount of water to rinse your mouth when brush your teeth.

**DO NOT SMOKE** for 2 week before and 2 weeks after surgery.

Wear a loose-fitting dress or gown and robe which does not require being put on over the head to the office. Wear flat shoes.

You **MUST** have someone spend the first night with you. A nurse is highly recommended as you will have drains that must be emptied.

When you arrive in the office, give the receptionist the telephone number of the pharmacy you would like us to call for any special medications the doctor might prescribe.

#### **AFTER SURGERY**

You are to go directly home and stay in bed with bathroom privileges only the first night with assistance. The following day you may be up to the bathroom and to get light meals for yourself only. You should stay on liquids or soft diet the first 36-48 hours following surgery.

Medication is to be taken as prescribed. No alcohol while taking any medications. Appointments should be kept on the proper days.

You may have a sponge bath on the second day after surgery, but **UNDER NO CIRCUMSTANCES** should the bandage on the abdomen become wet.

You will be told when you may shower. **NO TUB BATHS** for 2-3 weeks following surgery. No strenuous activity until you are told this is safe.

Any drains and sutures will be removed as indicated. Usually they are all removed by the tenth post-operative day.

Avoid scheduling any surgery during menstrual period.

You must stay leaning forward at all times especially while walking for the first 2 weeks.

**In any emergency, please call the office day or night. (949) 248-1900**

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**Patient's Signature**

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**Date**

## **Abdominoplasty (Tummy Tuck) Post-Operative Instructions**

### **Instructions**

- Have someone drive you home after surgery and help you at home for 1-2 days.
- Get plenty of rest.
- Follow balanced diet.
- Decreased activity may promote constipation, so you may want to add more raw fruit to your diet, and be sure to increase fluid intake.
- Take pain medication as prescribed. Do not take aspirin or any products containing aspirin until approved by your physician.
- Do not drink alcohol when taking pain medications.
- If you are taking vitamins with iron, resume these as tolerated.
- Do not smoke, as smoking delays healing and increases the risk of complications.

### **Activities**

- Start walking as soon as possible, as this helps to reduce swelling and lowers the chance of blood clots.
- Do not drive until you are no longer taking any pain medications (narcotics).
- Do not drive until you have full range of motion with your arms.
- No lifting greater than 5 lbs. for 6 weeks. This can be modified by your physician.
- Resume sexual activity as comfort permits, usually 2-3 weeks postoperatively.
- Avoid straining of abdominal muscles. Strenuous exercise and activities are restricted for 6 weeks.
- Return to work in 2-4 weeks.

### **Incision Care**

- You may shower 48 hours after removal of all drainage tubes.
- Avoid exposing scars to sun for at least 12 months.
- Always use a strong sunblock, if sun exposure is unavoidable (SPF 30 or greater).
- Keep incisions clean and inspect daily for signs of infection.
- No tub soaking while sutures or drains are in place.
- Wear your compression garment 24/7 for 6 weeks post op.
- Sleep with head slightly elevated and pillows under your knees to decrease tension on your incision.

### **What to Expect**

- You may experience temporary pain, soreness, numbness of abdominal skin, incision discomfort.
- Maximum discomfort will occur the first few days.
- You will have bruising and swelling of the abdomen. The majority of bruising and swelling will subside in 6-8 weeks.
- You may feel tired for several weeks or months.
- You may feel depressed a few days after your surgery or some time during your recovery. This is normal.

### **Appearance**

- Flatter, firmer abdomen with narrower waistline.
- You will walk slightly bent forward and gradually return to normal posture over next 3 weeks.
- Scars will be reddened for 6 months. After that, they will fade and soften.
- The scar will extend from near one hipbone to the other, low on the abdomen.

### **Follow-Up Care**

- Abdominal drains removed when less than 30 ml for 24-48 hours. (This will vary depending on your physician).

- Surface stitches removed in 7-10 days.

### **When To Call**

- If you have increased swelling or bruising.
- If swelling and redness persist after a few days.
- If you have increased redness along the incision.
- If you have severe or increased pain not relieved by medication.
- If you have any side effects to medications; such as, rash, nausea, headache, vomiting.
- If you have an oral temperature over 100.4 degrees.
- If you have any yellowish or greenish drainage from the incisions or notice a foul odor.
- If you have bleeding from the incisions that is difficult to control with light pressure.
- If you have loss of feeling or motion.