Reduction Mammoplasty

Instructions
This document has been prepared to help inform you about reduction mammoplasty surgery, its risks, and alternative treatment. It is important that you read this information carefully and completely. Please initial each page, indicating that you have read each page.

General Information
Women who have large breasts may experience a variety of problems from the weight and size of their breast such as back, neck and shoulder pain and skin irritation. Breast reduction is usually performed for relief of these symptoms rather than to enhance the appearance of the breasts. The best candidates are those who are mature enough to understand the procedure and have realistic expectations about the results. There are a variety of different surgical techniques used to reduce and reshape the female breast. As with all surgery, there is a risk of complications associated with reduction mammoplasty surgery.

Alternative Treatment
Reduction mammoplasty is an elective surgical operation. Alternative treatment would consist of not undergoing the surgical procedure, physical therapy to treat pain complaints or wearing undergarments to support large breast. In selected patients, liposuction has been used to reduce the size of the breast. There is also a risk of potential complications associated with alternative surgical forms of treatment.

Risk of Reduction Mammoplasty Surgery
Every surgical procedure involves a certain amount of risk. It is important that you understand the risks involved with reduction mammoplasty. An individual’s choice to undergo a surgical procedure is based on the comparison of the risk to potential benefit. Although the majority of women do not experience the following complications, you should discuss each of them with your plastic surgeon to make sure you understand the risks, potential complications and consequences of breast reduction.

Bleeding – It is possible, though unusual, to experience a bleeding episode during or after surgery. Should post-operative bleeding occur, it may require surgical treatment to drain accumulated blood. Do not take any aspirin or anti-inflammatory medications for then days before surgery, as this may increase the risk of bleeding.

Infection – Infection is quite unusual after this type of surgery. Should an infection occur, treatment including antibiotics or additional surgery may be necessary.

Change in nipple and skin sensation – You may experience a change in the sensitivity of the nipples and skin of your breast. Permanent loss of nipple sensation can occur after a reduction mammoplasty in one or both nipples.

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Skin scarring – All surgical incisions produce scarring. The quality of these scars is unpredictable. Abnormal scars may occur within the skin and deeper tissue. In some cases, scars may require surgical revision or other treatments.

Unsatisfactory results – There is a possibility of a poor result from the reduction mammoplasty surgery. You may be disappointed with the size and shape of your breasts.

Pain – A breast reduction may not improve complaints of musculoskeletal pain in the neck, back, and shoulders. Abnormal scarring in skin and deeper tissues of the breast may produce pain.

Firmness – Excessive firmness of the breast can occur after surgery due to internal scarring or fat necrosis. The occurrence of this is not predictable. If an area of fat necrosis or scarring appears, this may require biopsy or additional surgical treatment.

Delayed healing – Wound disruption or delayed wound healing is possible. Some areas of the breast skin or nipple region may not heal normally or may take a long time to heal. It is even possible to have loss of skin or nipple tissue. This may require frequent dressing changes or further surgery to remove the non-healed tissue. Smokers have a greater risk of skin loss and wound healing complications.

Asymmetry – Some breast asymmetry naturally occurs in most women. Difference in breast and nipple shape, size or symmetry may also occur after surgery. Additional surgery may be necessary to revise asymmetry after a reduction mammoplasty.

Breast disease – Breast disease and breast cancer are independent of breast reduction surgery. It is recommended that all women preform periodic self-examination of their breast, have mammography according to American Cancer Society guidelines and to seek professional care should breast lump be detected.

Breast Feeding – Some women have been able to breast feed after a reduction. If you are planning to breast feed following a breast reduction, it is important that you discuss this with your plastic surgeon prior to undergoing reduction mammoplasty.

Allergic reactions – In rare cases, local allergies to tape, suture material or topical preparations have been reported. Systemic reactions which are more serious may occur to drugs used during surgery and prescription medicines. Allergic reactions may require additional treatment.

Surgical anesthesia – Both local and general anesthesia involve risk. There is the possibility of complications, injury, and even death from all forms of surgical anesthesia or sedation.

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Additional Surgery
There are many variable conditions that may influence the long term result of reduction mammoplasty. Secondary surgery may be necessary to preform additional tightening or repositioning of the breasts. Should complications occur, additional surgery or other treatments may be necessary. Even though risk and complications occur infrequently, the risks cited are particularly associated with reduction surgery. Other complications and risks can occur but are
even more uncommon. The practice of medicine and surgery is not an exact science. Although good results are expected, there are no guarantee or warranty expressed or implied, on the results that may be obtained.

**Health Insurance**
Depending on your particular health insurance plan, breast reduction surgery may be considered a covered benefit. There may be additional requirements in terms of the amount of breast tissue to be removed and duration of physical problems caused by large breast. Breast reduction involving removal or small amounts of tissue may not be covered by your insurance. Please review your health insurance subscriber information pamphlet.

**Financial Responsibilities**
The cost of surgery involves several changes for the services provided. The total includes fees charged by your doctor, the cost of the surgical supplies, laboratory tests, anesthesia and hospital charges, by your doctor, the cost of surgical supplies, laboratory test, anesthesia and hospital charges depending on where the surgery is performed. Even if the cost of the surgery is covered by an insurance plan, you will be responsible for necessary co-payments, deductibles and charges not covered. Additional cost may occur should complications develop from surgery. Secondary surgery or hospital stay surgery charges involved with revisionary surgery could also be your responsibility.

**Disclaimer**
This document is used to communicate information about the proposed surgical treatment of large breast, along with disclosure of risks and alternative forms of treatment(s). This document attempts to define principles of risk disclosure that should generally meet the needs of most patients in most circumstances.

This document should not be considered all inclusive in defining other methods of care and risks encountered. Your plastic surgery may provide you with additional or different information which is based on all the facts in your particular case and the state of the medical knowledge.

*It is important that you read the above information carefully and have all of our questions answered prior to proceeding with surgery.*

**Patient Initials:** __________