Informed Consent

Gynecomastia Surgery

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INSTRUCTIONS

This document is about informed consent. It will tell you about Gynecomastia surgery (male breast reduction), its risks, and other treatment options.

It is important that you read this whole document carefully. Please initial each page. Doing so means you have read the page. Signing the consent agreement means that you agree to the surgery that you have talked about with your plastic surgeon.

GENERAL INFORMATION

Gynecomastia surgery removes extra fat, glandular tissue, and/or skin from large male breasts. In severe cases of gynecomastia, the heaviness of the tissue may cause the breasts to sag and stretch the areola (the dark skin surrounding the nipple). In such cases, the position and size of the areola can be improved with surgery. The extra skin may need to be removed, which can lead to more scars. Gynecomastia may result from hormonal changes, heredity, disease, or certain drugs. It can happen in one breast or both.

Surgeons have several ways to treat gynecomastia. Often, there is more solid breast tissue under the areola. It may need to be removed and examined. There can be fatty tissue around the chest, and it is better to remove it with liposuction. Breast cancer can occur in males. It happens less often than in females. The solid tissue that is removed may need to be tested for disease or cancer. Gynecomastia surgery can be done with other body shaping surgery, including liposuction. It can be done with other surgeries that are not medically required.

ALTERNATIVE TREATMENTS

Other ways to manage your condition include not having the surgery. You can wear undergarments to help mask large breasts. Some patients get liposuction to reduce the size of large breasts. All treatments have their risks and possible problems.

RISKS OF GYNECOMASTIA SURGERY

Every surgery has risks. It is important that you understand the risks and what can result from them. Every procedure has its limits. Choosing to have surgery means comparing the risks and benefits. Most patients do not have these complications, but you should talk about them with your plastic surgeon. Make sure you understand all possible outcomes of the reduction mammaplasty surgery.

SPECIFIC RISKS OF GYNECOMASTIA SURGERY

Asymmetry:

Most people's breasts are uneven even before surgery. After surgery, you may have differences in breast and nipple shape, size, or symmetry. You may need another surgery to fix the asymmetry after surgery.

Change in Nipple and Skin Sensation:

You may have less or no feeling in the nipples and breast skin. With some techniques, and after a few months, many patients get normal feeling back. In a nipple graft method, the nipple is removed and replaced as a skin graft. If your surgeon uses this method, you will lose feeling in the nipple.

Nipple and Areolar Necrosis:

It is very rare, but the areola (around the nipple) and the nipple may have poor blood flow after surgery. That may result in the tissue dying. This will lead to a wound and slow down your healing. The nipple and areola may be reconstructed if they need to be.

Unsatisfactory Result:

You can expect good results. However, there is no guarantee or warranty about the results. You may not like the results of a gynecomastia surgery. The nipples may be uneven and look different. The breast shape

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and size may not be what you expect. They may not work the way you expect. The wound can open or heal badly. You could lose feeling after surgery. Healing may result in a lost nipple. You may need another surgery to reconstruct it. Breast size may be wrong. You may not like the scar or where it is. You may not like the leftover skin at the ends of the incisions (dog ears). You may get thick scars and keloids where the cuts were made. You may need liposuction to thin the breast tissue outside where the gynecomastia surgery usually is. You may need another surgery to improve your results. The results may NOT improve with more treatments.

Breast Disease:

You can get breast disease and breast cancer without having Gynecomastia surgery. People who have had breast cancer or whose family members have had breast cancer are at a higher risk of developing breast cancer. You should see a doctor if you think you have a lump. If a lump is found before or during breast surgery, you may need more tests and treatment. These come at their own costs.

DISCLAIMER

Informed consent documents give you information about a surgery you are considering. These documents explain the risks of that surgery. They also discuss other treatment options, including not having surgery. However, informed consent documents can't cover everything. Your plastic surgeon may give you more or different information. This may be based on the facts of your case.

Informed consent documents are not meant to define or serve as the standard of medical care. Standards of medical care are determined based on the facts involved in an individual case. They may change with advances in science and technology. They can also change with the way doctors practice medicine.

It is important that you read the above information carefully and get all your questions answered before signing the consent agreement on the next page.

 _____ **Patient Initials**
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CONSENT FOR PROCEDURE OR TREATMENT

1. I permit Dr. Thomas Jeneby MD and the doctor's assistants to do the procedure **Gynecomastia Surgery.**
2. I got the information sheet on Gynecomastia Surgery.
3. I understand that, during the surgery, an unexpected situation may require a different medical procedure than the surgery listed above. I permit the doctor listed above, the assistants and/or designees to do any treatment that my doctor thinks it is needed or helpful. My permission includes all treatments that my doctor does not plan to do at the start of the surgery.
4. I understand what my surgeon can and cannot do. I understand that no warranties or guarantees have been hinted at or stated outright about the outcome of the surgery. I have explained my goals. I understand which outcomes are realistic and which are not realistic. All my questions have been answered. I understand the surgery's built-in risks. I am aware of other risks and possible issues, benefits, and options. I understand and choose to have the surgery.
5. I agree to the anesthetics that are needed or helpful. I understand that all types of anesthesia have risks and may result in complications, injury, and sometimes death.
6. I am aware of the serious risks to my health when blood products are used. I agree to my doctor using them if my doctor, assistants, and/or designees think they are needed or helpful.
7. I agree to the disposal of any tissue, medical devices, or body parts taken out during or after the planned surgery or any other operation that is needed or helpful.
8. I agree to have the right parts of my body photographed or televised before, during, and after the surgery for medical, scientific, or educational reasons, if the pictures do not reveal my identity.
9. For medical education, I agree that onlookers can be in the operating room.
10. I permit my Social Security Number to be given to the right agencies for legal reasons and medical device registration, when necessary.
11. I agree to the charges for this surgery. I understand that the doctor's charges are separate from the charges for the hospital and the anesthesia. I understand that there may be more charges if more procedures or treatments are needed or helpful. I agree to those charges, if any.
12. I understand that not having the surgery is an option and that I can opt-out of having the surgery.
13. IT HAS BEEN EXPLAINED TO ME IN A WAY THAT I UNDERSTAND:
    a. THE ABOVE SURGERY TO BE PERFORMED
    b. THERE MAY BE OTHER SURGERIES OR TREATMENT OPTIONS
    c. THERE ARE RISKS TO THE SURGERY

I CONSENT TO THE SURGERY AND THE ITEMS LISTED ABOVE (1-13).
I UNDERSTAND THE EXPLANATION AND HAVE NO MORE QUESTIONS.

_____

Patient or Person Authorized to Sign for Patient Date/Time

_____

Witness Date/Time

_____ Patient Initials

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