Informed Consent

Zygoma (Cheekbone) Fracture Repair Surgery

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INSTRUCTIONS

This informed consent document will help you learn about zygoma (cheekbone) fracture repair surgery. It will outline the 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

Injury to the cheekbone can damage the skin and deeper structures. The cheekbone (and the bones around the eye) can be broken or disrupted. Depending on how bad the injury is, other parts of the face may also need treatment. Some zygoma fractures may be minor. These may not need surgery. You will need surgery to fix soft tissues or damaged structures, like broken cheekbones or bones around the eye. Zygoma fracture repair surgery is done to reduce potential damage due to abnormal healing of moved cheekbones or bones around the eye.

This surgery is often performed using an open technique in which cuts are made to the skin. Some cuts may need to be made in the mouth or in the eyelid. Surgery is typically done under general anesthesia.

The timing of zygoma fracture repair surgery is critical, as cheekbone fractures tend to heal quickly. Zygoma fractures may cause functional deformities of the face, cheekbone, and bones around the eyes. These may be seen or felt.

OTHER TREATMENTS

You could choose to not have the zygoma fracture repair surgery. There are risks and possible problems if you do not do the surgery. You could have deformities which may be seen or felt. You may also have vision problems.

RISKS OF ZYGOMA FRACTURE REPAIR SURGERY

All surgeries have risks. It is important that you know these risks. You must also know about the possible problems that may come up during or after surgery. Every procedure has its limits. Choosing to have surgery means comparing the risks and benefits. Most patients do not face problems, but you must talk about them with your plastic surgeon.

SPECIFIC RISKS OF ZYGOMA FRACTURE REPAIR SURGERY

Bleeding:

It is rare for you to bleed during or after surgery. If you have bleeding after surgery, you may need more treatment to stop the bleeding or remove blood that has collected (hematoma). Bleeding may make breathing difficult and may lead to temporary or permanent blindness. Use of aspirin or anti-inflammatory medicines ten days before surgery can lead to a greater risk of bleeding. Non-prescription “herbs” and dietary supplements can also increase the risk of bleeding. Tell your surgeon if you are taking such medications before surgery. High blood pressure that is not under control may cause bleeding during or after surgery. Collection of blood under the skin may delay healing and cause scars.

Infection:

Many germs are found in the mouth. Oral hygiene is vital to prevent infection. If you have an infection, you may need more treatment, like antibiotics. In some cases, infection may need more surgery. Any implants placed at the time of surgery may need to be removed.

Eyelid Problems:

Cuts around the eyelids may result in scars. This may cause the eyelid to look bad or not work properly. It can damage your eye. You may need surgery to fix this.

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Blindness/Change in Vision/Diplopia (Double Vision):
In rare cases, the eyes may be damaged. This can cause pain, vision problems, or even vision loss. This cannot be predicted. You may have double vision after surgery. This may be temporary or may be permanent. If your vision does not come to normal, you may need glasses or more surgery.

Shifting of the Eyeball:
The eyeball may look more obvious or less obvious after surgery. This may happen even months after surgery. More surgery may be needed to fix this.

Malocclusion:
If there are injuries to bones that hold the teeth in place, it is likely that the teeth may not line up properly after surgery. You may need surgery or dental work to fix this.

Tooth Injury/Removal:
In rare cases, injury to teeth or their roots may occur. You may need more surgery or dental therapy to fix this. In some cases, lose or damaged teeth, or teeth that prevent the proper repair of a facial fracture may need to be removed.

Wiring of Upper and Lower Teeth:
In some cases, it may be necessary to realign the position of the upper teeth to the lower teeth. Metal bands, wires, and elastic bands may be used to keep the teeth in proper position during the healing period. During this time, you may not be able to open your jaw at all. You will need to take only liquid food. This may result in weight loss and you may have difficulty speaking. This may last for six to eight weeks. During the application or removal of these devices, there may be injury to the teeth or gums. You will need to take more care to ensure oral hygiene with such devices on your teeth.

Scars:
You can expect proper wound healing after surgery. However, abnormal scars may occur on the skin and in the deeper tissues. Scars may look bad and may be a different color than the rest of the skin. You may have visible marks from stitches. More treatment, including surgery, may be needed to fix this.

Poor Results:
In some cases, you may not get the results you want from the zygoma repair surgery. The surgery may cause unacceptable deformities that may be seen or felt. You may also see loss of function or structural changes in position. More surgery may be needed if you are not satisfied with the results. Partial healing of damaged structures before surgery may interfere with the results of the surgery. Unsatisfactory results may not improve with more treatment.

Damage to Deeper or Surrounding Structures:
Structures such as nerves, teeth, tear ducts, blood vessels, and muscles may be damaged during surgery. This may happen depending on the type of surgery done. Injury to deeper structures may be temporary or permanent. It may result in change in appearance and functional problems. For example, nerves near the jaw bone can be injured because of the original trauma or the surgery. This can lead to numbness or weakness. Injury or loss of function may occur in structures near the injury or site of surgery.

Asymmetry:
The human face is normally asymmetrical. Surgery can make one side of the face look different from the other. In rare cases, the difference may be more obvious after surgery.

Numbness/Weakness:
You may have permanent numbness in the cheek skin after zygoma surgery. This cannot be predicted. Less sensation or loss of sensation in the cheek area may not go away after surgery. Weakness or paralysis of facial movements may occur. This can be temporary or permanent.

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Chronic Pain:
In rare cases, you may have chronic pain after zygoma surgery.

Bone or Cartilage Grafts:
In some cases, you may need bone or cartilage to fix facial structures. This may be taken from other areas of the body, like the ribs, skull, nose, or ear. This may cause bleeding. It may also lead to a collapsed lung, deformity, nose block, or brain injury.

Hardware and Deeper Structures:
Some surgeries use small screws, metal plates, or wires to fix cheekbone structures. You may see these items after surgery. These may be exposed in a wound or in the mouth. You may need to remove these later.

Delayed Healing/Nonunion:
You may have fracture disruption or delayed healing. Some areas of the cheekbone may not heal properly. Some areas may heal slowly. Bones may fail to heal together in a stable way. Areas of skin may die and may require frequent bandage changes or more surgery.

Long Term Effects:
More changes in cheekbone appearance may occur after injury or surgery. Aging, sun exposure, and other factors not related to zygoma repair surgery can also change your appearance. More surgery or other treatments may be needed.

Additional Surgery:
You may need more surgery in case of issues. Many conditions may impact the risk and long-term results. The issues listed above for cheekbone repair surgery are rare but could raise a need for more surgery or other treatments. Other issues and risks are even more rare. Medical practice and surgery are not an exact science. We expect good results, but there is no guarantee for the results. You may need to go in for more surgery to improve your results after a cheekbone repair surgery.

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.

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CONSENT FOR PROCEDURE OR TREATMENT

1. I permit Dr. Thomas Jeneby and the doctor's assistants to do the procedure **Zygoma (Cheekbone) Fracture Repair Surgery.**
2. I got the information sheet on Zygoma (Cheekbone) Fracture Repair 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 provide any treatment that my doctor thinks 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. All my questions have been answered. I understand the surgery's 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 even 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 surgery. I also agree to any additional surgeries or treatment that is needed or helpful.
8. I agree to have parts of my body photographed or televised appropriately 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 THAT ARE 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

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