

# CONSENT FOR RHINOPLASTY

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I have discussed the operation with **Dr Kohout** and I have received information on the possible risks and complications of surgery. The risks include, but are not limited to the complications listed below:

## ANAESTHETIC RISKS

All anaesthetics have risks which should be discussed with your anaesthetist prior to the procedure.

## GENERAL RISKS OF SURGICAL PROCEDURES

- Areas of the lungs may collapse (atelectasis), possibly leading to chest infection/pneumonia. Treatment of this complication may need admission to a hospital, intravenous antibiotics and chest physiotherapy.
- Clots in the legs (deep vein thrombosis or DVT) with resultant pain and swelling. Rarely part of this clot may break off and go to the lungs (pulmonary embolus or PE) which can be fatal.
- A heart attack because of strain on the heart or a stroke, both of which can be fatal.
- Bleeding may occur. At worst, this will require return to the operating theatre to evacuate the blood clot and to stop the bleeding.
- There will be bruising after surgery. This usually settles after approximately 2-3 weeks
- Wound infection may complicate the operation. The infection is usually treated with antibiotics, oral or intravenous, depending on its severity. This may lead to the wound opening up and / or increased scarring. Infection following rhinoplasty is very uncommon due to the excellent healing qualities of the face. If infection does occur, it will become evident within one week of surgery and may require treatment with antibiotics. This may delay the healing process or result in the development of scar tissue.
- Dehiscence or reopening of the wound may occur. This usually happens as a result of infection and is managed by treating the infection. Dehiscence in the absence of infection can be treated by resuturing the wound.
- Allergies to anaesthetic agents or antiseptic solutions
- Scarring: surgery results in scars, which may heal in unexpected ways. Unfavourable healing may result in scars that are wide, pigmented, lumpy, red, itchy, uncomfortable or even painful long term or even permanently.

## SPECIFIC RISKS ASSOCIATED WITH RHINOPLASTY

- Bleeding. Bleeding is the most likely problem that may occur after rhinoplasty. It can be problematical in about 5% of cases. It is most likely to occur immediately following surgery or the same evening. It is possible in cases of persistent problematical bleeding that return to the operating theatre will be required.
- Scarring: Incisions or cuts used to perform the surgery are designed so as to be unnoticeable. The incisions can be either completely internal or may involve a small cut through the base of the nose. The scars, both internal and external may heal unpredictably and become thickened and unsightly. In the unlikely event of this occurring, additional measures such as injections or revisional surgery may be necessary.
- Unpredictable scarring within the nasal passages may produce “webs” that may restrict the nasal opening or breathing.
- Nasal shape: Swelling of the nose can affect nasal contour for some months ( up to 12-18 months) and during this period of settling, changes in nasal shape can be expected.
- Irregularities in nasal shape and contour can occur in around 15% of operations. Some of these may require surgical correction.
- Asymmetry in nasal shape, either at the nasal tip or the body of the nose may occur.
- It is likely that close scrutiny of your new nasal shape may reveal some small irregularity in contour or symmetry of the dorsum of the nose or the nasal tip. Many will improve with time but if they cause concern, surgical correction is usually possible
- If the operation involves repositioning of the septum (the partition between the nostrils), **perforation of the septum** is possible. This usually causes no problems, but in some cases it may result in “whistling”

during breathing or unpleasant crusting. If necessary, perforations of the septum can be corrected surgically. Septoplasty may cause collapse of the nasal profile.

- Breathing:** The nose is part of the airway by which air enters the body during breathing. By manipulating the nose shape it is possible the nasal air passageway can be altered. You may notice nasal congestion and some restriction to airflow through the nose, particularly in the early post-operative months. This can be expected to resolve as swelling settles though permanent nasal blockage is possible.
- Anosmia.** You may experience a diminished or absent sense of smell.
- Sensation:** The tip of the nose often feels numb for some months but this is quite normal and usually recovers completely. In the first few weeks there may be a feeling of stiffness or numbness in the upper lip. This is because swelling in the nose can affect the movement of the lip. As with all other changes due to this swelling process, it is quite transient. The lip or a front tooth may be numb temporarily.
- Injury inside the eyesocket may occur. **Blindness**, though extremely rare, has been reported after rhinoplasty.
- Injury to the tearduct system may occur in approximately 2% of operations. This may manifest by persistent tearing up of the eye. This settles spontaneously in the majority of cases, but may occasionally require an operation to correct a blockage in the tearduct.
- Injury to the base of skull may lead to meningitis, death or permanent disability.

## PATIENT CONSENT

- The doctor has explained my condition and the proposed procedure. I understand the risks of the procedure, including the risks that are specific to me, and the likely outcomes. The doctor has explained other relevant treatment options and their associated risks.
- I have been given an Information Sheet** about the procedure and its risks. I was able to ask questions and raise concerns with the doctor about my condition, the procedure and its risks, and my treatment options. My questions and concerns have been discussed and answered to my satisfaction.
- I understand that Smoking increases the risks of surgery and if I choose to smoke, I accept these higher risks.**
- I understand that the procedure may include a blood transfusion. I understand that if organs or tissues are removed during the surgery, that these may be retained for tests for a period of time and then disposed of sensitively by the hospital. The doctor has explained to me that if unforeseen events happen during the procedure, they will be treated accordingly.
- I understand that no guarantee has been given as to the results of the procedure.
- I understand that secondary, revisional operations may be required in some cases. I also understand that charges will be made for the use of the operating room, whether in the day surgery or in the hospital, and for any materials required. I agree to be responsible for these charges. Anaesthetic fees will be charged independently by your anaesthetist. A secondary surgical fee may be charged.
- I am aware that the practice of medicine and surgery is not an exact science, and I acknowledge that no guarantees have been made to me as to the results of the operation or procedure; nor are there any guarantees against unfavourable results.
- I consent to be photographed before, during and after the surgery; that these photographs shall be the property of the doctor and may be used for scientific and educational and promotional purposes. You will not be identified in any photo or video.

I have read the above list of possible complications of [rhinoplasty](#) and I accept the risks inherent in the operation. I would like to proceed with the operation and I have asked **Dr Kohout** to perform it.

X .....

Signature

Surgeon (Witness)

Date



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