

Cosmetic Procedures



ABOUT OUR PRACTICE

"We believe it is important for any patient to know as much as possible about their surgery, their physician, and their options. We approach each patient on an individualized basis, learning as much as possible about their goals in my initial consultation. Our practice is designed to provide patients with a comfortable atmosphere where they can feel safe and confident about their medical care."

Frederick J. Duffy, Jr., MD, FACS & Brice W. McKane, MD, FACS

PROCEDURES

There are a wide variety of cosmetic procedures available today. Below is a brief description of some of the more common procedures.

Liposuction

Liposuction has become the most popular cosmetic plastic surgery procedure performed in the United States. Nearly 110,000 liposuction procedures were performed in 1996. The ideal candidate for liposuction is a healthy patient with localized areas of unwanted fat beneath firm, elastic skin. Although patients of all ages may benefit from liposuction, the loss of skin elasticity with increasing age limits the indications of the procedure for older patients. If there is excess sagging skin along with excess fat, typically skin removal needs to be performed along with the liposuction.

Women tend to seek improvement in the contour of the hips, thighs, abdomen, legs, buttocks and face/neck area. Men most frequently seek improvement in the waist and abdomen. Liposuction cannot compensate for deficiencies in diet and exercise, and is not designed to be a weight loss method. It is also not effective with superficial irregularities such as cellulite.

Like all surgical procedures, liposuction does have associated complications. The skin surface may be irregular and there may be asymmetry between the areas that have been treated. Numbness and pigmentation changes may also occur. Additional surgery in the future is occasionally needed.

Most patients recover quickly. Some degree of discomfort is experienced after surgery along with swelling, discoloration, and numbness. Patients wear compression garments for several weeks following surgery. Typically patients are able to return to work within a few days and to resume strenuous activity within the first month. Most of the discoloration and swelling disappears by six weeks but some swelling may persist for six months or longer. Liposuction is typically performed on an outpatient basis and is frequently combined with other cosmetic surgery procedures.



Breast Augmentation

Breast augmentation is the second most common cosmetic plastic surgery procedure performed in women. The procedure is designed to enhance the breast contour and size. This approach is also used to correct breast volume following pregnancy, often in conjunction with a breast lift (mastopexy). It is occasionally used to balance differences between the breast sizes, or as a reconstructive technique following breast cancer surgery.

Breast augmentation may be performed with saline breast implants consisting of a silicone shell filled with salt water, or with silicone gel implants. Your physician can advise you on the differences and make recommendations to meet your needs.

Breast augmentation is typically performed as an outpatient. The usual incisions used are underneath the breast or around the nipple. Patients usually have a moderate amount of pain for the first several days and no heavy lifting should be done for several weeks after surgery. The sutures that are used during surgery are absorbable and do not need to be removed. Patients are followed closely after surgery. Most patients are able to resume normal activities within 3-4 weeks.

Mastopexy / Breast Lift

Breast lift or mastopexy is a surgical procedure to raise and reshape sagging breasts. Gravity, pregnancy, and nursing take their toll on a woman's breasts and often the breasts atrophy or shrink as well following childbearing years. Mastopexy can address these concerns and is occasionally done along with breast augmentation.

The best candidates for mastopexy are healthy, emotionally stable women who are realistic about what can be accomplished with surgery. The procedure entails leaving scars on the breasts which usually heal well. Like other body contouring procedures, mastopexy involves trading scar for improved contour. The procedure is typically performed as an outpatient and the amount of scarring around the breasts is a function of how much breast lift is needed which is determined by the patient's individual breast anatomy. Complications include bleeding, infection, asymmetry, and raised or widened scars. A full mastopexy usually leaves a scar pattern similar to a breast reduction scar. Realistic, appropriately informed patients are usually very satisfied with this popular procedure.

Facelift

Facelifting or rhytidectomy is designed to counteract the effects of gravity, the sun, and smoking on skin. Facelifts can be done alone or in conjunction with other procedures such as forehead lift, eyelid surgery, or nose reshaping. The best candidates for a facelift are a man or woman whose face and neck have begun to sag but whose skin still has some elasticity and whose underlying bone structure is well defined. This procedure is a higher risk procedure in smokers and every effort is made to have patients stop smoking prior to performing a facelift.

Facelifting will help redefine the jaw line, the cheek, and the neck. Facelifts are very individualized procedures. It is important that the surgeon communicate what can be delivered with a facelift to a patient prior to surgery. Facelifts are typically performed under general anesthesia and most patients stay overnight following surgery. Like all procedures performed by Drs. Duffy and McKane, safety is paramount with this procedure.

The surgery is usually performed through incisions around the ears and a separate incision under the chin. The procedure typically takes 3-4 hours. Dressings applied after surgery are changed the next day and drains that have been left under the skin are all removed prior to the patient going home.

The swelling that occurs following a facelift typically takes several weeks to totally resolve. Most patients should plan for 10 days to 2 weeks off of work following the surgery, though this is individualized based upon the patient's situation. Bruising may persist for several weeks after surgery. Patients taking aspirin or any other medicine that thins the blood need to inform their surgeon prior to undergoing a facelift. Patients who have high blood pressure are also at increased risk for hematomas (bleeding under the skin after surgery) following this surgery.

Every patient above the age of 40 who is undergoing a facelift should undergo a thorough history and physical examination by a medical doctor prior to surgery.

Chemical Peel

Chemicals have been used to peel the skin of the face for many centuries. The peel leaves the underlying skin looking fresher, younger, and healthier. Chemical peels remove the superficial layers of the skin and will often improve blemishes, wrinkles, and uneven skin pigmentation. Different peeling agents are available and the peels are frequently performed in conjunction with other facial rejuvenation procedures such as a facelift. Chemical peels are often performed in the office. The lighter the peel, the quicker patients return to their normal work and routines.

Alphahydroxy acids (AHA) such as Glycolic Acid produce the mildest and lightest peels. These "lunch time" peels are often performed in our office and patients can typically be in and out of the office in 15-20 minutes. They can be used to treat fine wrinkles, areas of dryness, or uneven pigmentation and even acne. An alphahydroxy acid is a good component of a daily skin care regimen and is usually applied in the evening before bedtime.

Trichloroacetic acid is a medium depth peel that impacts on fine surface wrinkles and superficial blemishes and pigment problems. These peels can also be done in the office and involve a bit longer recovery time as there is more peeling.

Phenol is the strongest of the peeling agents. It can ultimately lead to the greatest improvement but at the expense of the longest down time following the peel. Phenol is also the most prone to lightening the skin in a permanent fashion. Scarring may result if it is applied to areas other than the face.

Preparation before the peel typically involves a good skin care program which we will design for you here in our office. Once a peel has been performed, maintenance peels on a regular basis help maintain the skin looking youthful and healthy.

Sun avoidance and a good sunblock is important after chemical peeling. Once again, the deeper the peel the longer it will take for all the redness and skin peeling to resolve.

Botox Injections

Botox is a paralyzing agent that historically had been used for quite a number of years for ocular conditions that are the result of spasm of the muscles around the eyes. It was noticed following the use of this technique for these procedures that the appearance of patient's facial wrinkles often improved. Because of this, Botox has been injected for facial wrinkles now for many years.

The office procedure involves injections of the paralyzing agent into the facial muscles. It is a relatively simple procedure but can greatly improve forehead horizontal and vertical wrinkles as well as the angry looking scowl of the upper eyelids. The Botox usually lasts for 3-5 months so repeat injections will be needed if a lasting effect is desired. The procedure is occasionally done with other cosmetic procedures in an ancillary fashion.

Injectable Fillers

A wide variety of soft tissue fillers that can be injected into the face are now available such as Restylane. Most commonly these involve collagen, fat, or some form of denatured human dermis. All of these approaches share common characteristics. These procedures often yield impressive early results but unfortunately are typically not permanent.

Injecting collagen or fat will often improve deep facial wrinkles, creases, and furls. They also may have good results with depressed scars or areas of depressed acne scarring. There are other permanent injectables such as Gortex which carry a high risk of infection. Reaction to collagen, though rare, can occur. For this reason, an allergy skin test needs to be performed about a month before collagen injections for patients who are considering collagen.

Injectable fillers are typically injected under local anesthesia in the office.

Rhinoplasty

A rhinoplasty or nasal reshaping is one of the most common plastic surgery procedures performed. The nose has a very central and prominent position on the face and is often an area of concern for patients. There are ethnic differences between patients that need to be preserved when nasal reshaping is being considered. Nasal reshaping is performed on a wide age range, though not typically performed before the age of 18. Rhinoplasty leads to nasal swelling that takes months to totally resolve and the healing

response to nasal surgery can often evolve over the course of a year. In about 10% of cases a secondary procedure may be required to correct a minor deformity.

Like other cosmetic operations, good communication is important between the physician and patient prior to undertaking surgery. The patient needs to communicate what about their nose they want improved and the surgeon needs to communicate in turn to the patient what he or she believes can realistically be delivered with surgery.

Rhinoplasty operations take anywhere from 1-3 hours and are usually performed under IV sedation or general anesthesia as an outpatient. Rhinoplasty can be combined with other facial procedures. The surgery can take longer if there are breathing difficulties and work on the inside of the nose is required. The procedure can be performed with scars totally hidden within the nose or as an open procedure where a scar below the nasal tip across the midline strut of the nose is made. Fortunately, this scar usually heals well. Whether an open or closed approach is used is a function of each individual patient's anatomy and needs.

After surgery, the nose will be swollen and nasal packing will typically be in place. There may be bruising beneath the eyes as well. Most patients after surgery are up and about within a couple of days and return to work within a week or so. Healing following rhinoplasty can be a slow process, however. It may be several weeks or a month or so before most of the swelling is gone and the bruising is resolved.

Abdominoplasty



Abdominoplasty is commonly known as a "tummy tuck" and removes both fat and skin from the lower abdomen. This procedure typically involves tightening the underlying muscles of the abdominal wall as well. This body contouring procedure can dramatically improve the way a protruding abdomen looks and is most commonly performed in women after childbearing years. It is important to realize, however, that like many other body contouring procedures the patient trades a scar for improved contour.

The best candidates for abdominoplasty are men or women who are in relatively good shape but are bothered by centralized fat deposits and loose abdominal skin. Typically there is a component of loosened or stretched abdominal wall and excess fat and skin and all of these can be addressed with this operation. Patients often need a full abdominoplasty but more limited versions of the procedure can be performed when only a small amount of fat and skin need to be removed.

Abdominoplasty is typically performed under general anesthesia. Depending upon the extent of the procedure, patients may go home the same day or may spend a day or two in the hospital. Patients who have a full abdominoplasty generally take 4-6 weeks to feel totally normal.

Blepharoplasty

For additional information on eyelid surgery, see our website dedicated to blepharoplasty at www.dallasblepharoplasty.com.

Blepharoplasty is a procedure which involves removing fat and excess skin from the upper or lower eyelids. Excess fat and skin in the eyelids tend to make individuals look older or tired. The procedure can be combined with facelifting or browlifting. Most patients tend to be 40 or older but hereditary excess fat and skin will occasionally lead to surgery before the age of 40.

This surgery can be performed in an outpatient surgery center or as an office procedure under straight local anesthesia. Incisions are typically made in the skin overlying the eyelids and usually heal beautifully with minimal scarring. Occasionally the lower eyelid incision is made inside the lower eyelid when only fat needs to be removed.

Recovery from blepharoplasty is fairly rapid. Bruising around the eyelids is common and usually resolves within a week or two. The swelling from the surgery also takes a week or so to resolve but most patients are comfortable going back to work within 7-10 days.

Otoplasty

Otoplasty or ear reshaping is performed on patients with prominent ears. The ears typically stick out much more than normal from the head. This procedure is typically performed in children or teenagers but also occasionally in adults. Incisions are made behind the ears and are well hidden. The technique involves utilizing both sutures and/or other approaches to reshape the cartilage to allow the ear to sit back in a more natural fashion.

The surgery is performed as an outpatient under general anesthesia. Complications from the surgery include infection, asymmetry between the ears, and most importantly there is the possibility that the correction may not be permanent. Dressings are applied at the time of surgery and are removed after several days and sutures taken out 10-14 days later.

Although some asymmetry may exist following surgery, the majority of patients are very pleased with their results.

Spider Veins

Spider veins are a common and frustrating problem for many patients, particularly women following childbearing years. These tiny branch-like veins are very superficial and may be quite bright appearing and typically involve the legs. They are treated with the injection of sclerosing agents in an attempt to obliterate the veins. Though successful, the main risk of the procedure is recurrence or the inability to totally eradicate the vein. Superficial pigmentary changes can result from the injections. It is

important to diagnose any pre-existing deeper vein problems first and occasionally a doppler study of the legs will be required prior to sclerotherapy.

The procedure typically takes 10-15 minutes. Several injections will be made during this session and typically repeat sessions are common. Some form of compression garment following injection is important for several days. It is important to realize that the treated veins will look worse before they look better and it may take a couple of weeks for all the bruising to resolve following sclerotherapy. Sclerotherapy usually obliterates the veins in a fairly dramatic fashion though the patients are at risk for recurrent superficial spider veins.

Facial Implants

Facial implants are used on patients to redefine areas of bony deficiency in the face. The areas that are usually addressed with facial implants are the chin, the cheeks, and occasionally the jaw. There are several different varieties of implants but they all carry the risk of infection, malposition, and exposure. If any of these occur, the implant must be repositioned or removed.

The use of facial implants is frequently used in combination with other plastic surgery procedures. In some instances, alternatives to facial implants such as moving the underlying bones of the facial skeleton do exist.

If facial implants are inserted without additional surgery this is typically performed as an outpatient under IV sedation or general anesthesia.

Swelling following surgery is common but usually resolves within a week or two. Most patients are surprised to find that people won't recognize that they have had facial implants but will simply note that they look better. These implants are designed to give the face a fuller and more balanced look.

PREPARING FOR SURGERY

UPON SCHEDULING YOUR PROCEDURE

Healthy patients recover from surgery more quickly, heal better, and are less likely to have complications following surgery. It is crucial that you discuss any underlying health problems with your surgeon so that the risk of complications can be minimized.

Smoking may lead to poor wound healing. Smokers are much more likely to have delays in healing as smoking reduces circulation to the skin and tissues. We strongly encourage you to stop smoking before surgery. If you are a smoker, please inform your surgeon.

It is important that you discuss any and all medications you are currently taking. It may be necessary to stop taking medications containing aspirin or ibuprofen (Advil or Motrin) before surgery. Both of these drugs are blood-thinning agents and can cause bleeding problems during and after surgery. It is also important that you inform us about any herbal or holistic supplements you are taking. Some of these products may be associated with bleeding problems. You may need to consult with your primary care physician if you have any concerns about the medications that you are currently taking. Do not discontinue taking any medication without the approval of the prescribing physician.

THE DAY PRIOR TO SURGERY

In most cases you will be given a prescription for postoperative medications when you come to our office for your final appointment before surgery. We recommend you go ahead and fill that prescription at your pharmacy before the day of surgery, so that it will be available to you when you return home after surgery. If you have any questions about your medications, you can consult your pharmacist or ask your surgeon when he sees you prior to the surgery.

You will be unable to drive yourself home after surgery, and the hospital/surgical facility will not allow you to leave in a cab by yourself. Therefore it is important to arrange to have someone take you to surgery and bring you home after you are released from the surgical facility. It is also required that you have someone stay with you for at least 24 hours after surgery.

We recommend avoiding any alcoholic beverage for 24 hours prior to surgery as alcohol may dehydrate you. It is also very important that you do not eat or drink anything, including water, after 12:00 midnight the night before surgery. If you need to take any medications during this time, take it with as little water as possible.

Your anesthesiologist will call you the night before surgery. If they are not able to reach you, you will be able to ask any questions upon your arrival at the surgical facility.

THE DAY OF SURGERY

It is important you have nothing to eat or drink, including water, after midnight prior to surgery. If you eat or drink prior to surgery it may be necessary to cancel the surgery. If medications are to be taken, please take them early in the morning if possible with only a sip of water. All medications should only be taken if authorized with the anesthesiologist or your surgeon.

Be sure to wear comfortable, loose-fitting clothing that does not have to be pulled over your head. Do not wear hairpins or jewelry. Do not bring any money or valuables with you to the surgical facility.

WHAT TO EXPECT AFTER SURGERY

Of course, exactly what to expect after surgery depends on what kind of surgery you are having. However, some general guidelines are noted below that apply to most surgical procedures.

Dressings & bandages: You will be fitted with a dressing (bandage) placed at the conclusion of your surgery. The type of dressing depends on the type of surgery. The dressing will usually be removed at your first postoperative visit, which is typically 2 or 3 days following your surgery. After your initial dressing comes off, you will be instructed on what sort of dressing to wear for the next couple of weeks, or you may need none at all. You will be given instructions as to how to care for the incision sites. Most sutures used are absorbable and will not need to be removed, although in some procedures sutures are used which need to be removed in the office.

Swelling and bruising: Moderate swelling and bruising may occur after any surgical procedure. If they are excessive or continuous, it may be indicative of bleeding or infection and our office should be notified as soon as possible.

Pain: You will usually be sore, particularly the first few days following your surgery. This pain may resolve in days or may persist for a week or so depending on the type of surgery. You will be given pain medication following your surgery. You should plan on eating and drinking very lightly the evening after your surgery, as nausea following general anesthesia is fairly common. The pain medicine will not totally alleviate your pain but the goal is to make you as comfortable as possible, particularly in the first few days.

Numbness: During the procedure, it is likely that some of the sensory nerves to the skin will be cut. It is also possible to experience some numbness from the local anesthetic that is administered during the procedure. It can be expected that most normal nerve activity will return within 2-3 months as the nerve endings heal. However, some procedures are associated with a higher risk for areas of permanent numbness.

Itching: You may experience some external itching following your surgery. The surgical prep solutions can cause some skin dryness and the surgical tapes occasionally irritate the skin. Keeping the skin clean and moisturized should minimize the discomfort from the irritation.

Bleeding: It is normal to experience some bleeding from the incision site. You may notice some blood on your dressings following your surgery. It should not be excessive and you should notify the office if any excessive bleeding occurs.

Seeing Your Results: Depending on the type of surgery, you may be able to see a dramatic improvement immediately after surgery. However, due to swelling and bruising it is often not possible to see the final result for many weeks or even months after surgery. Be aware your results will continue to improve as the swelling resolves.

You will likely feel tired and weak for a variable amount of time after your surgery. You may have intermittent nausea and some dizziness. Constipation is also occasionally a problem because of the pain medicine you are taking. You will gradually get better, although you may experience periods of ups and downs. If you have any questions, we encourage you to call the office. We will make every effort to make this procedure as pleasant for you as it can possibly be.

GENERAL SURGICAL RISKS

It is important that you fully understand the risks associated with any surgery. We encourage you to obtain as much information as possible about the surgical procedure and the associated risks. If you have questions and concerns about the procedure or risks, we encourage you to ask us to help you to better understand them. We want you to make an informed decision about your surgery.

As with any surgery, there are risks associated with the anesthesia and with surgery in general. Pulmonary embolism (blood clots of the lungs), severe allergic reactions to medications of anesthetic, cardiac complications, heart attack, stroke and even death are rare but potential risks of any surgical procedure. You will receive a detailed surgical consent prior to surgery and will have the opportunity to discuss the risks. The risks listed below are only some of the more common risks associated with a breast augmentation. All of these are infrequent, but it is important you are aware of the possibility of these risks.

The risks below are those which are associated with most procedures. There may be additional risks associated with a particular procedure. We will discuss the risks with you of any procedure you are considering.

Thick, wide or depressed scars: The size and positioning of the surgical scars depends on the type of surgery. As your incisions heal, your body creates new collagen that forms a scar. The majority of the healing process takes place in the first few weeks after surgery. However, you should be aware that scars take up to a full year to reach their final appearance. Depending upon the healing process, a scar may be abnormally wide, dark, or depressed. You will be started on a program of scar massage several weeks following your surgery to help the healing process. If abnormal scarring occurs, there are a variety of non-surgical and surgical solutions that will be presented to you. However, you should be aware there is always a scar after surgery.

Delayed healing: Some patients heal at a slower rate than others. Factors that play a role in delayed healing include (but are not limited to) infection, decreased circulation and smoking, poor nutrition, advanced age, prior surgery or radiation, Lupus, or other diseases such as Diabetes. It may be necessary to have wound care treatment of a delayed open area for weeks after surgery if you have any wound healing complications. Our surgeons often work with patients who are diabetic or have had radiation. In fact, many complex wound cases are sent to this office for care. So if you do experience any problems with wound healing they will be able to provide you experienced care.

Unsatisfactory result: You have decided to have a board-certified plastic surgeon perform a procedure to enhance or improve the appearance of a specific part of your body. Plastic surgeons are specially trained and strive to give you the most pleasing and aesthetic result. Although these procedures are performed to improve the appearance of an area, it is important to remember that complications occur and that sometimes expectations are not achieved. Some procedures will require a secondary

procedure or revision surgery to help achieve the result you were striving for. It may even be possible that the result you want cannot be achieved.

Bleeding: It is possible, though unusual, to experience a bleeding episode during or after surgery. Should post-operative bleeding occur, it may require emergency treatment to drain accumulated blood or blood transfusion. Do not take any aspirin or anti-inflammatory medications for ten days before surgery, as this may increase the risk of bleeding. Non-prescription “herbs” and dietary supplements can increase the risk of surgical bleeding.

Infection: Infection is unusual but can occur after any type of surgery. Infection is more likely when there is delayed wound healing. If an infection occurs, treatment may be necessary including antibiotics or hospitalization.

Seroma: Fluid accumulations infrequently occur beneath the skin. Should this problem occur, it may require additional procedures for drainage of the fluid.

Additional Surgery: Should complications occur, additional surgery or other treatments may be necessary. Even though risks and complications occur infrequently, the risks cited are particularly associated with breast augmentations. 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 is no guarantee or warranty expressed or implied, on the results that may be obtained.

INFORMATION ABOUT SCARS AND SCARRING

Every surgical procedure involves some form of scarring. The amount of scarring, length of the scars, and the location of the scars is very much a function of the type of surgery that is performed. The scars may be small and straight such as in a breast augmentation, or they may be very long and prone to widening such as in a tummy tuck or abdominoplasty.

With any surgical procedure, it is important to realize that every scar, regardless of size, goes through a process of healing that lasts as long as a year. Regardless of the size of a scar, scars are often initially slightly raised and somewhat reddened. They are occasionally painful. As scars heal, patients will occasionally note that the scars are very sensitive and this may take months to resolve.

Scars will soften as they heal and become less reddened and usually end up pale and flush with the skin. However, it is important to realize that any scar may be raised, widened, or permanently numb as can the skin around the scar. Most patients' scars go through the normal process of healing and rather quickly end up looking very good. However, problems can occur with any scarring and wound healing process regardless of the success of the operation itself. Each individual patient heals differently, and even the same patient may notice a difference in the healing process from one surgery to the next.

There are a number of things that you, the patient, can do to minimize the appearance of surgical scars. All patients are encouraged to begin a program of scar massage several weeks after surgery. This improves the blood supply to the skin and he believes this softens the scars quicker. It is also very important to strictly avoid sun exposure to any scar for a year following any surgical procedure, particularly on the face or other sun-exposed area. If you need assistance choosing a sunblock product, please speak with our esthetician. Additionally, smoking has an extremely detrimental impact on any wound healing process and may result in a poor scar appearance.

If a scar is prominent there are treatments which may be recommended including scar revisions. These treatments are designed to improve scarring where possible, but it is not possible to "erase" a scar. The goal is to avoid a problematic scar. Some patients are prone to hypertrophic scars or keloids. If you have a history of problematic scars you should be certain your surgeon is made aware of this prior to any surgical procedure.

It is always our goal to have patients well informed prior to any surgery. Because it is impossible to do a surgical procedure without some type of scarring, we provide this information to help you be aware of the process of scarring and wound healing. It is important to realize the healing process does occur over time and may take weeks, months, or even a year or more to achieve a final result.

If you have any questions regarding the location and type of scarring associated with the particular procedure(s) you are considering, please do not hesitate to ask for additional information.

FINANCIAL INFORMATION

The cost of cosmetic surgery involves several different components. These consist of the surgeon's fee, the operating room fee (often called the facility fee), and the anesthesia fee. In addition, depending on the type of surgery being performed there may also be the cost of implants. We will provide you with a written quote of the costs for surgery, including anesthesia and the surgical facility costs. Many minor procedures can be performed in our office surgical suite under local anesthesia, which allows us to pass a cost savings on to our patients as well as provide a comfortable surrounding.

Scheduling of any surgery requires the commitment of time and resources by your surgeon as well as the anesthesiologist and the facility where the surgery is to be performed. Therefore, a deposit is necessary to reserve your surgery date. The deposit is 10% of the surgeon's fees. Full payment for the procedure will be due one week prior to the surgery date. Failure to make this payment will result in cancellation of the surgery and forfeiture of the deposit. If surgery is cancelled for non-medical reasons within one week of the surgery date, the 10% deposit will be forfeited. If surgery is cancelled due to medical reasons or a family emergency, a full refund will be made, including the deposit.

Please be aware that there may be additional charges incurred for preoperative testing, such as bloodwork, EKG, and Chest x-rays. If you cancel surgery after having completed your preoperative testing, you will still be billed by the hospital/surgical facility for those tests. Insurance policies will not cover these items.

As with any procedure, there is always a possibility of complications following surgery. If those complications require additional hospitalization and/or procedures, there could be additional charges. Of course, serious complications are extremely unusual. It is important to remember that health insurance will not pay for any hospitalization, medication, or other healthcare provided as a result of a complication from a cosmetic procedure.

It is impossible for anyone, including your physician, to guarantee the results of any surgical procedure. While every effort possible is made to insure the results you desire, you may not achieve exactly what you hoped. It may be possible to improve the results with additional surgeries, but those will involve additional costs. Please understand that the payments you make to your physician, hospital, and anesthesiologists are for their expertise and services. If the results do not meet your expectations, it is not possible to refund any portion of the payments made.

FINANCING COSMETIC SURGERY

Our office does not offer financing programs through the office directly. It has always been our policy to focus on the health and well being of our patients, rather than on financing. However, there are a number of financing programs which can be utilized

which are not done directly through our office and we are happy to make our patients aware of these programs.

TRADITIONAL FINANCING PROGRAMS

There are a variety of options available for financing of cosmetic procedures. Some patients finance utilizing their credit cards or by loans from their own banks. Our office accepts Mastercard, Visa, Discover, and American Express. There is also a Compass Bank in our building which does loans for cosmetic procedures, as do most banks.