

Consent for Lower Lid Blepharoplasty

This information is given to you so that you can make an informed decision about having a lower lid Blepharoplasty surgery. Take as much time as you wish to make your decision about signing this informed consent. You have the right to ask questions about any procedure before agreeing to have it.

A lower lid Blepharoplasty is when excess skin and fat is removed from the lower lid. The incision is marked beneath the lashes close to the lid margin. The lid is anesthetized with local anesthesia beneath the skin and in the lower lid between the lid and the globe. Once anesthesia is obtained a scleral shell is inserted in the eye. This is to protect the eye from sharp objects used during surgery. The skin is incised and the fat pockets are opened and contoured as necessary. Bleeding is controlled with cautery. The excess skin is removed. The wound is closed with an absorbable suture.

Alternatives:

1. Do nothing
2. Remove skin without the fat
3. Remove fat without the skin.

Risks and Complications:

1. Bleeding: Normally controlled with gentle pressure or heat cautery.
2. Infection: Infection can occur if the site is not kept clean and antibiotic ointment not used daily. An infection area becomes reddened and sore to the touch. It may have purulent material on the incision site. It is treated with antibiotic ointment and possibly oral antibiotics.
3. Pain: Pain is usually for the first 24 hours and can be controlled with oral pain medications.
4. Loss of eyelashes. This is rare.
5. Damage to the globe and vision loss from the scalpel, needle used to inject the anesthetic or cautery instrument: This is very rare and is prevented by placing the scleral shell in the eye prior to surgery.
6. Corneal Abrasion for the scleral shell: Usually heals in 24-48 hours. Treated with antibiotic ointment and Tylenol.
7. Wound dehiscence: Lid may heal well with no treatment. Sometimes another suture may be needed to close the wound.
8. Under-correction: Not enough skin/fat is removed and more needs to be removed. This is usually done in the office.
9. Over-correction: Too much skin is removed and the eyelid is pulled down. This is often resolved with time and massage of the lid.

Consent for Treatment:

By signing below I acknowledge that I have read and understand the above and have had my questions answered by the surgeon to my satisfaction. I also understand that these are the most common complications and not all the complications that can occur. I consent to the above surgery.

Signature of Patient

Date