



.....
(Full name of the Patient)

.....
(Date of birth or PESEL)

.....
(Phone number, e-mail address)

INFORMATION, INFORMED CONSENT, DECLARATION, RECOMMENDATIONS - TUMESCENT LIPOSUCTION

INFORMATION

Procedure Information.

The following consent form is a document written to inform the patient about the liposuction procedure (fat removal), the risks of the surgical procedure, and other alternative treatment methods. It is very important that you read this information carefully and thoroughly. Please sign each page to confirm that you have read the entire document.

General Information. Characteristics of the Liposuction Procedure, Indications.

Liposuction is a surgical procedure aimed at removing excess fat from certain areas of the body, such as the face and neck, upper arm areas, torso, abdomen, hips, buttocks, thighs, knees, calves, and ankle areas. It is not a method for weight reduction but aims to remove fat deposits that do not respond to diet and exercise. Liposuction can be used as a single method for body shaping or in combination with other surgical methods such as facelift, abdominoplasty, or thigh lift surgeries, which remove excess skin and lift sagging tissues. The best candidates for liposuction are individuals with relatively normal body weight who have excess fat in specific areas of the body. The best results from liposuction can be achieved in individuals with elastic skin. Sagging, loose skin may require additional surgery, such as abdominoplasty. Surface irregularities not associated with fat tissue cannot be corrected with liposuction. Liposuction slightly improves the appearance of cellulite. Liposuction is performed using metal cannulas, which are inserted through small skin incisions to break up and suction out fat tissue. Liposuction can be performed under local or general anesthesia. The tumescent technique involves infiltrating the fat tissue with a solution composed of anesthetics and adrenaline, which can reduce discomfort during surgery and minimize bruising postoperatively. Appropriate compression garments and dressings are used to reduce swelling and accelerate healing.

Alternative Treatment.

Alternative treatment includes not undergoing the surgical procedure. Diet and exercise may effectively reduce excessive fat tissue. Abdominoplasty with the removal of excess skin and fat tissue may be necessary for some patients post-liposuction. Other methods used for body contouring or fat removal include pharmacological or laser lipolysis, using high-pressure water to break down fat tissue, and procedures involving ultrasound action on fat cells. Alternative treatment methods also involve certain risk factors and potential complications.

The Purpose of the Proposed Procedure:

To remove excess fat tissue from the area being treated.



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- * Cosmetic surgery
- * Aesthetic laser therapy
- * Regenerative medicine

Predictable Consequences of the Procedure:

1. **Scars** - Any surgical procedure results in scars, which sometimes are not aesthetically pleasing. Abnormal scars can appear on the skin's surface and in deeper tissues. Scars may differ in color from the surrounding skin. Additional surgery may be required to correct these scars.
2. **Skin Discoloration / Swelling** - Bruising and swelling of the skin are normal after liposuction. The skin in the operated area may appear lighter or darker than the surrounding skin. Rarely, this skin discoloration may persist for a long time or remain permanently.
3. **Asymmetry** - Some asymmetry of the body may occur after liposuction. Factors such as skin tension, fat tissue accumulation, muscle tension, or bone visibility under the skin can affect the result of abdominoplasty.
4. **Visible Skin Surface Irregularities** - Visible skin surface irregularities and depressions may occur after liposuction. Additionally, skin wrinkling or folding may occur. Over time, this may improve or require additional surgery.
5. **Long-term Results** - Changes in body shape may be related to aging, weight loss or gain, pregnancy, or other body changes occurring independently of previous liposuction.
6. **Pain** - Pain of varying intensity may occur after liposuction surgery. Chronic pain is rare and usually associated with nerve traction by the forming scar. Painkillers should not be taken while driving, making important decisions, or consuming alcohol.

Risk Factors Associated with Liposuction.

Every surgical treatment involves a certain amount of risk factors, hence it is extremely important to understand the risks associated with the liposuction procedure.

Below are scientifically documented possible side effects or complications related to liposuction surgery.

1. **Patient Selection** - Individuals with low skin elasticity, medical problems, obesity, or unrealistic expectations should not be considered candidates for liposuction.
2. **Bleeding** - Rarely occurs. It is possible during or after surgery. If postoperative bleeding occurs, it may require immediate treatment to prevent hematoma formation or a blood transfusion. To reduce the risk of bleeding, aspirin and anti-inflammatory drugs should not be taken for at least 21 days before the planned procedure. Untreated hypertension can cause bleeding during or after the procedure. Excess blood collected under the skin (hematoma) can delay healing and cause abnormal scarring.
3. **Infection** - Is a very rare complication after this type of surgery. If an infection occurs, treatment involves antibiotics. If the infection does not respond to antibiotics, additional surgery may be necessary. There is a higher risk of infection when abdominoplasty is performed together with fat suctioning.
4. **Sensory Disturbances of the Skin** - Some sensory disturbances of the skin are common complications immediately after surgery. Most patients regain normal sensation within a few months. Permanent partial or complete loss of skin sensation after surgery is extremely rare.
5. **Seroma** - Rarely, fluid may accumulate between the skin and deeper tissues. This can occur after surgery, trauma, or intense physical exercise. If this happens, drainage of the fluid is necessary.
6. **Fat Necrosis** - Fat necrosis may occur. It may be necessary to remove this tissue.

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Damage to Deeper Structures.

During the surgical procedure, there may be damage to deeper structures such as nerves, blood vessels, muscles, and the peritoneum (in very rare cases). These damages can be temporary or permanent.

1. **Anesthesia** - Both general and local anesthesia carry certain risks. These may include complications and even death.
2. **Allergic Reactions** - Rarely, allergic reactions to sutures, topical preparations, and draping can occur. Systemic reactions are very serious and are associated with drug reactions. Allergic reactions may require additional treatment.
3. **Shock** - Occurs extremely rarely and is associated with significant blood loss in cases of liposuction involving large areas and the removal of large amounts of fat. It requires immediate treatment.
4. **Pulmonary and Cardiovascular Complications** - Respiratory complications can be caused by a pulmonary embolism, fat embolism, or partial lung damage from general anesthesia. These disorders can cause death. Cardiac complications are a risk associated with any general anesthesia. If you experience shortness of breath, chest pain, or abnormal heartbeats, you should see a doctor immediately.
5. **Skin Necrosis** - Skin necrosis is very rare after liposuction. Additional treatment, including surgery, may be necessary.
6. **Unsatisfactory Outcome** - Postoperative body shape deformities may manifest as visible or palpable irregularities when pressing the skin. The need for repeat surgery often cannot be predicted before the initial surgery.
7. **Prolonged Healing** - Wound separation or prolonged wound healing is possible. Some areas of the body may not heal properly, and healing may be prolonged. Sometimes certain areas of the skin may become necrotic. This may require frequent dressing changes or additional surgeries to remove poorly healing tissues. Smokers have a higher risk of skin necrosis or healing complications.
8. **Information on Contraceptive Drugs** - Please inform whether you are taking contraceptive drugs and whether you are pregnant. Many drugs, including antibiotics, can neutralize contraceptive drugs and lead to pregnancy.
9. **Intimate Contact After Surgery** - May cause bleeding or hematoma formation. Additionally, bruising and swelling may occur, prolonging or complicating the healing process.
10. **Medications** - Painkillers should not be taken while driving, making important decisions, or consuming alcohol.
11. **Smoking** - Patients who smoke or are exposed to cigarette smoke have a higher risk of surgical complications during the healing process and abnormal scar healing. Additionally, they may experience side effects such as anesthesia issues or bleeding.

Please select the correct statement by placing an "x" in the indicated space below:

I do not smoke. I understand that there is a potential risk of surgical complications from being in a room with cigarette smoke.

I smoke. I understand the risks of smoking-related complications.

It is important not to smoke cigarettes for at least 6 weeks before the surgery until the healing process is complete.

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Neurological and Psychiatric Symptoms.

12. The literature describes the occurrence of psychiatric disorders after liposuction surgery related to unmet expectations regarding the postoperative appearance. Realistic patient expectations are important. The procedure aims to improve appearance, not to achieve a perfectly symmetrical result.

Complications due to patient error may occur in the following cases:

1. Non-compliance with postoperative recommendations.
2. Refraining from performing certain activities.

Possible accompanying procedures and circumstances justifying them:

During the surgical procedure, situations may arise requiring the implementation of an additional procedure not agreed upon with the patient before the surgery.

The occurrence of complications during the surgery or postoperative period may necessitate additional procedures not previously discussed with the patient.

Necessary Additional Treatment.

Possible accompanying procedures and circumstances justifying them:

During the surgical procedure, situations may arise requiring the implementation of an additional procedure not agreed upon with the patient before the surgery. The occurrence of complications during the surgery or postoperative period may necessitate additional procedures not previously discussed with the patient.

The potential need for additional treatment after surgery.

In the event of complications, additional surgery or other treatments may be necessary. Even when the risk of complications is not high and they occur rarely, one should be prepared for their possibility and for procedures aimed at improving the result of the initial surgery.

Informed consent for the procedure is used to inform the patient about the proposed treatment and includes presenting the risk factors and alternative treatment methods.

This document is based on scientific literature and clinical practice. However, it does not cover all methods or the risks associated with them.

This consent reflects the current state of knowledge only at the time of publication.

I declare that **Dr. Maciej Sznurkowski** conducted a discussion with me on, regarding preoperative, intraoperative, and postoperative procedures. During the conversation, I had the opportunity to ask questions concerning the eyelid correction surgery, possible complications during the operation, postoperative care, and the risks associated with the planned procedure.

The information was presented to me in an understandable and comprehensive manner. I also received postoperative recommendations.

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INFORMED CONSENT - LIPOSUCTION

Type of Planned Procedure:

Liposuction of the following body areas:

Type of planned anesthesia: local tumescent anesthesia.

I, the undersigned, /name and surname/, based on Articles 32-35 of the Act of December 5, 1996, on the Professions of Physician and Dentist (Journal of Laws 2008 No. 136, item 857, as amended) and Article 19, paragraph 1, point 3 of the Act of August 30, 1991, on Healthcare Institutions (Journal of Laws 2007 No. 14, item 89, as amended), consent to the planned and above-described surgical procedure to be performed by **Dr. Maciej Sznurkowski** and his chosen assistants. I have received a full set of information about the procedure and postoperative recommendations.

Furthermore, I declare that I have been comprehensively informed in a language I understand about:

1. The necessity and method of preparing for the procedure, including the need to terminate or interrupt any ongoing therapy.
2. The type of procedure, expected duration, method of anesthesia, and anticipated outcome.
3. Typical, most frequently occurring complications of the procedure.
4. Postoperative care, including the necessity of implementing pharmacological therapy.
5. Typical, most frequently occurring complications of the implemented pharmacological therapy.
6. The necessity of follow-up consultation visits after the procedure.
7. Negative consequences and complications that may arise from delayed compliance with the doctor's recommendations.
8. The possibility of complications related to the procedure and the healing process, and the consequences of not following the doctor's recommendations, as outlined in the Eyelid Surgery Information.
9. The costs of the procedure and treatment, which I accept.

I am aware that the achievable effect of the procedure, the healing period, and the effectiveness of any postoperative therapy cannot be precisely determined due to the nature of the planned procedure. I am also aware that the final outcome of the procedure and the course of the postoperative period are strictly dependent on the individual case. Additionally, I am aware that the final effect of the procedure depends on many factors listed in the Procedure Information, including my health condition, age, skin elasticity, individual anatomy of the treatment area, and the skin and body's response to the administered medications.

DECLARATION

Before undergoing the procedure, I was thoroughly and accessibly informed that the final result of the procedure is not identical in every case and may differ from the results achieved by other patients. I am aware that during the procedure, treatment, and anesthesia, unforeseen circumstances may arise that, if not addressed, could pose a danger of loss of life, severe bodily harm, or severe health impairment, requiring additional procedures. I hereby authorize the physician authorized to perform the planned procedure to carry out additional procedures that may be necessary due to the aforementioned circumstances. The consent given in this paragraph will also cover any health conditions requiring treatment that were unknown to my physician at the time the procedure began.

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I consent to the administration of the proposed anesthetic agents, including the suggested postoperative pain treatment. I understand that all forms of anesthesia carry some degree of risk and the possibility of complications, injury, and sometimes death.

I declare that I have read the pre- and postoperative recommendations. I hereby commit to following all medical recommendations, including postoperative instructions, and to attending the scheduled follow-up appointments.

I declare that I had the opportunity to ask the physician questions regarding the planned procedure, possible complications, risks of complications, further treatment, postoperative recommendations, and that the answers provided were understandable and comprehensive. I was also informed about alternative treatment methods (including not undergoing treatment) and alternative procedures.

I declare that the content of the consent was presented to me before undergoing the procedure, and the time that elapsed between the presentation of the consent and the performance of the procedure was entirely sufficient for me to fully understand its content.

I consent to the appropriate documentation of the procedure, as well as to photographing, recording the procedure using image and sound recording devices for medical, scientific, or educational purposes, provided that my identity is not disclosed.

I agree that during the procedure, persons necessary to provide this service and other persons whose participation in the procedure has a strictly educational purpose and will involve only observing the procedure and familiarizing themselves with the associated documentation may be present.

I am aware that the basis for a civil claim against the physician is not the cases where the procedure's result does not strictly meet my expectations, provided that its performance and the subsequent care complied with the requirements of current medical knowledge.

I consent to the disposal, including the transport and disposal, of medical equipment used during the procedure and tissues or body parts that were removed during the procedure.

RECOMMENDATIONS - TUMESCENT LIPOSUCTION

1. **Transportation:** A family member or friend should drive you home after the procedure. Ideally, they should stay with you for the next 24-48 hours. After the procedure, you should not drive any vehicles.
2. **Postoperative Compression Garment:** After the procedure, the patient is dressed in a special compression garment to provide comfort and help the skin adjust to the new body contour.
3. **Washing and Bathing:** After the procedure, until the wounds heal, take showers and avoid baths, especially in jacuzzis.
4. **Operated Areas:** Try to keep the dressings as clean and dry as possible. Change them daily and whenever they become soaked to prevent infection. Avoid overheating the operated areas. Significant drainage, meaning the outflow of bloody fluid from the incision sites, is expected. Although the fluid may be red, it usually contains about 1% blood. The more intense the fluid outflow, the less bruising and swelling. We recommend placing a waterproof material on the bed and other areas to prevent staining. When the fluid stops leaking, we recommend washing the incision sites with water and an antibacterial agent and applying a clean dressing. When the wounds are fully healed, we recommend moisturizing them (e.g., with petroleum jelly). Burning, itching, pain, hardness, numbness, or stiffness are normal symptoms and should subside within a month, although they may last much longer.

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5. **Manual Lymphatic Drainage (MLD):** This is a special type of massage performed by a qualified masseur or physiotherapist to help the natural flow of lymph in the body. We recommend starting MLD no earlier than 21 days after the procedure. MLD will then reduce swelling, speed up the healing process, and reduce stiffness. Additionally, we recommend gentle compression and movement of the treated areas only in the first week after the procedure (for several days after the procedure). Forcing the fluid out through the puncture sites and drains will help reduce swelling, bruising, and the risk of hematoma formation.
6. **COMPEX Electrostimulation:** We recommend starting COMPEX about 21 days after the procedure.
7. **Physical Activity:** Do not overexert yourself but try to return to normal activity during the first week after the procedure. Excessive swelling and discomfort may indicate overexertion. It is normal to feel dizzy, especially when standing up and changing dressings. Remember to always have someone help you during these activities for the first few days after the procedure. Protect the operated areas from sunlight; use SPF 30 or higher for about 3 weeks after the procedure, and certainly during the bruising period, to avoid discoloration. Additionally, apply sunscreen to the incision sites until they are fully healed.
8. **Diet:** If you feel nauseous, eat small amounts of easily digestible food. To reduce stomach irritation, take medication with food. Drink plenty of fluids, about 3 liters a day.
9. **Alcohol:** Try to abstain from alcohol for at least 5 days before the procedure. During the postoperative period, avoid excessive alcohol consumption to prevent prolonged bruising and swelling reduction.
10. **Smoking:** Try not to smoke or significantly reduce smoking. Smoking worsens circulation and slows the healing process.
11. **Expectations:** Remember that the goal of the procedure is not weight loss but contouring, improving body shape, and modeling. Since the body tends to retain fluids after the procedure, you may notice a temporary (lasting up to about 3 weeks) weight gain. Furthermore, the goal of the procedure is not to achieve perfection but to improve appearance. Patients undergoing lower abdomen procedures may experience significant swelling in the pubic area, affecting the labia majora in women and the penis and scrotum in men. Postoperative discomfort usually includes deep muscle pain lasting about 3-4 weeks, starting to subside after about 7 days. A slight increase in body temperature, facial flushing, neck, and upper chest may last about 48 hours. Symptoms of depression may occur and should start to subside as swelling and bruising decrease, usually after about a week. Menstrual irregularities are also a side effect. If the procedure was performed on the thigh area, ankle, and calf swelling may persist for several months.
12. **Medications after the procedure:** Take antibiotics and pain medications as prescribed by your doctor. If you are prescribed antibiotics, always complete the full course.

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Patient's signature and date

7

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Physician's signature and date

