

# Desert West Surgery

## BREAST SURGERY CONSENT

You will be scheduled to have breast surgery. This may be a lumpectomy, needle localization excision, excisional or incisional breast biopsy. Your surgeon will remove all or part of the area of concern. The area of concern may have been detected by ultrasound or mammogram, which means you, may not be able to feel it, or it may have been detected on physical examination. In most instances you will be able to have your breast surgery performed as an outpatient procedure, which allows you to go home after it is completed and you have recovered from anesthesia.

Our surgeons perform numerous breast surgeries every year. Breast surgery is generally a very safe operation, but complications can occur as with any operative procedure. It would be impractical and possibly misleading to describe all very rare complications in detail. Complications from breast surgery can include bleeding, infections, seromas (accumulation of clear fluid), or hematomas (accumulation of blood). If during your surgery something arises that could lead to one of these complications your surgeon will do everything that is possible to prevent it. Even though everything possible is done to avoid a complication one may still occur. If a complication arises it is important that you contact the Desert West Surgery nurse or physician. This will allow us to treat you in an appropriate manner. Sometimes all that is needed is to place you on antibiotics or aspirate the accumulated fluid; rarely is a second operation needed.

It is not uncommon to experience some pain and discomfort after your breast surgery. You will be prescribed pain medication to make you more comfortable. Dressings may be needed over the incision for several days, and a properly fitting bra is recommended for support. You may feel fatigued after your surgery but you should return to feeling normal within a few days.

For your safety and comfort an anesthesiologist will be present at your surgery. He/she will ensure that proper measures are undertaken to protect your medical health and keep you as comfortable as possible during your procedure. You will meet with him/her prior to surgery and be given the opportunity to discuss your anesthesia.

We hope this helps to clarify the risks involved with your breast surgery. If you have further questions or concerns regarding the risks of your surgery, be sure to ask to discuss them with your surgeon or nurse prior to signing this consent.

I, 

Please Print Your Name
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, , certify that I have read the above or had read to me the contents of this form, and give my consent to have the abovementioned surgery performed. I understand that in spite of every skill and prudent effort made to avoid complications during this procedure, there is no guarantee that a complication will not occur.

<b>X</b>	<b>X</b>	
Patient Signature (Guardian/Parent)	Witness	Date