

**FACE AND NECK LIFT
INFORMATION AND
CONSENT FORM
(YÜZ VE BOYUN GERME AMELİYATI
HASTA BİLGİLENDİRME VE RIZA
BELGESİ)****BARCODE
(BARKOD)**

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Dear Patient / Legal Representative;

You have got information about the state of your health (health of your patient), medical treatment recommended for you, surgical or diagnostic procedures and their alternatives, advantages, risks and possible damages. You have a right to reject or approve them fully or partially, or stop their performance at any stage of their performance if you want to do so.

We would like to you to read this document and understand information about medical implementations in order to get your consent for their performance, not to scare or make you give up on treatment.

INFORMATION

PRELIMINARY DIAGNOSIS:

PLANNED TREATMENT / PROCEDURE:

NAME/SURNAME OF PHYSICIAN WHO PERFORMS THE PROCEDURE:

INFORMATION ABOUT THE PROCEDURE

Facelift (face rejuvenation) surgeries are surgical procedures performed to correct some of the signs of aging on the face and neck. With age, the skin and muscles of the face begin to relax, lose elasticity and wear out. Although these operations are not anti-aging operations; These are surgeries that rejuvenate the face by repairing and stretching the skin and deeper tissues under the skin. Facelift surgery can be performed alone or in conjunction with an eyebrow lift, vacuum liposuction, eyelid surgery, and nose surgery. The most ideal areas for facelift surgery are areas where relaxation begins on the face and neck, while maintaining skin elasticity and bone structures. Facelift surgeries include details that need to be planned for each person as a result of the assessment. Facelift surgery is everyone's personal business. The best candidates for facelift surgery are patients with a sagging face and neck, but with elastic skin and well-defined bone structure. If the patient has any previous diseases or regularly used medications, the physician should be notified about them. In a neck lift, an incision is made that extends from the front of the ear to the earlobe and then rotates behind the ear. The skin of the face and neck is released. The soft tissues of the face containing the facial muscles are sutured upwards. Excess skin is removed and sutured to the incision in front of and behind the ear. If fat accumulates in the jaw area under the chin, it is removed by liposuction. The vertical stripes in the neck area are released with a 3-4 cm horizontal incision under the chin, and the inner corset is formed by stitching each other. Sagging skin of the neck appears at an earlier age in people with a small lower jaw. Chin tip prostheses can be used to lighten the chin during a neck lift. Thus, the face profile is also restored. The operation is performed under general anesthesia. Since other parts of the face are also intervened in addition to **Neck Lift**, the operation time lasts between 5 and 7 hours.

EXPECTED BENEFITS OF THE PROCESS:

- This prevents the appearance of a line under the chin and jaw.
- Prevents friability of fat around the neck and jaw.
- With wrinkles on the face
- Saggy face
- There are wrinkles in and around the lower eyelid.
- Loss of shape around the lips and mouth
- This is a method that benefits everyone who wants to rejuvenate and renew their face

RESULTS THAT CAN BE EXPERIENCED IF THE PROCEDURE IS NOT PERFORMED:

You cannot achieve the aesthetic appearance you want in your face and neck area.

ALTERNATIVE IF THERE ARE ANY:

Alternative treatments include treating the laxity of the face and neck without facelift surgery. Surgical or non-surgical techniques such as chemical abrasion and liposuction can be used to correct lax skin, wrinkles, and excess fatty tissue.



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RISKS AND COMPLICATIONS OF THE PROCEDURE:**General risks and complications**

Every surgical operation has some risks. It is important to understand the risks of facelift surgery. Preference of the surgical way is directly related with the risks and potential benefits. Although most patients do not experience complications, which we will discuss below, each should be discussed with your plastic surgeon; It is important to fully understand the risks, possible complications and results of facelift surgery.

Bleeding: Although rare, bleeding problems may occur during or after surgery. If bleeding occurs after surgery, emergency drainage or blood transfusion may be required. Aspirin or anti-inflammatory drugs should be stopped ten days before surgery, as they increase the risk of bleeding. Hypertension that is not under the control of a doctor can also cause bleeding during or after surgery. Subcutaneous bleeding can slow healing and cause scarring.

Infection: After this operation, infection is usually not expected. In rare cases, if an infection develops, additional antibiotic therapy or surgery may be required. Bad scar (scar): Although good wound healing is expected after surgery, abnormal scars may form on the skin and deeper tissues. These scars differ in color from the surrounding skin and may not look pretty. After suturing, visible scars may remain and additional treatment may be required.

Damage on deep structures: Deeper tissues such as blood vessels, muscles and nerves can be damaged after surgery. The potential for this to occur may vary depending on the type of facelift surgery. This damage can be temporary or permanent.

Asymmetry: Normal human faces are asymmetrical. As a result of facelift surgery, there may be differences between the two sides.

Surgical anesthesia: Both local and general anesthesia involves risk. Any type of surgical anesthesia or sedation is fraught with complications, injury, or even death.

Nerve Damage: Motor and sensory nerves can be damaged during facelift surgery. After facelift surgery, you may experience weakness or loss of facial movement. Nerve damage can cause temporary or permanent loss of facial movement and sensitivity. This type of damage can heal over time. Damage to the sensory nerves of the face, neck, and ears can cause temporary or permanent numbness. A painful nerve is very rare.

Chronic pain: Chronic pain is a very rare complication after a facelift.

Skin irregularities, skin cancer: A facelift is a surgery to stretch the skin and deeper structures. Skin irregularities and skin cancers can develop independently of a facelift.

Dissatisfying result: There is a chance that facelift surgery will not give good results. This carries risks such as unacceptable visible deformities, loss of facial movement, scarring (cracks, splitting) and loss of sensation. You may be disappointed with the result of the surgery. In rare cases, additional surgery may be required to achieve better results.

Allergic reactions: Local allergies to rarely used patches, sutures, or topical preparations have been reported very rarely. Systemic reactions, which are more serious, can occur with medication taken during or after surgery. Allergic reactions may require additional treatment.

Hair loss: Hair loss may occur in the areas where the skin is lifted (elevated) during the operation Whether this will happen or not cannot be predicted.

Delayed healing: The wound may separate or slow down healing. In some areas of the face, normal improvement may not be seen or may be delayed. Some areas of the skin may die. Smokers have a higher risk of complications such as skin loss and delayed wound healing.

Long-term effects: As a result of old age, weight gain or loss, sun exposure, and some other conditions, the percentage can follow these changes. Facelift surgery does not stop aging and does not provide constant tension to the face and neck. In the future, new surgeries and treatments may be required to preserve the results of facelift surgery.

ESTIMATED DURATION OF THE PROCEDURE

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**POSSIBLE UNWANTED EFFECTS OF THE MEDICINES TO BE USED AND THE ISSUES TO BE CONSIDERED:**

Use the medicines recommended by your doctor in accordance with the instructions for use. Your doctor will inform you about the possible adverse effects of the drugs and the issues that need attention.

ISSUES THAT THE PATIENT SHOULD BE ATTENTION BEFORE AND AFTER THE PROCEDURE:

After facelift surgery, your cheeks will get bigger and taller. After application, as with other aesthetic procedures, slight swelling, redness or bruising may occur for a while. Swelling, redness, or bruising will disappear completely within a few days after application. We add that it is not recommended to do facial massage for several weeks after application.

One day after neck lift surgery, a drain is removed from the back of the ear to prevent the accumulation of fluids in the area. Postoperative ice application speeds up the healing process. You will be discharged on the second day of surgery. Sunglasses may be worn on discharge. The stitches on the face and eyelids are removed after 1 week. The metal sutures inside the hair are removed on the 10th day.

You can take a bath 2 days after the operation. Facial numbness that goes away after about a few weeks is normal. Use gentle gestures while brushing your hair while applying makeup. Heavy exercise such as sex and hard housework should be avoided for at least two weeks, and activities such as alcohol, steam bath and sauna should be avoided for several months. Sunscreens should be used regularly for up to 6 months. Swelling and bruising disappear after 3 weeks. As a rule, you can return to work in the 2nd week.

PROBLEMS THAT MAY BE EXPERIENCED IF NOT FOLLOWING THE RECOMMENDATIONS

If you do not pay attention to the issues to be followed, your doctor will inform you about the problems you may experience.

HOW TO GET MEDICAL HELP ON THE SAME MATTER WHEN NEEDED?

Accepting the treatment / surgery is a decision you make with your free will. If you change your mind you can personally apply to our hospital/ hospitals which perform this kind of treatment/ operation.

Telephone: 0850 811 3400

Medical research: Subject to the patient confidentiality rules set out in the Patient Rights Statement, I give my consent to view clinical information from my medical records to advance medical research, medical research, and physician training; I consent to the publication of the research results in the medical literature as long as patient confidentiality is maintained. I am aware that I may refuse to participate in such a study and that this refusal will not adversely affect my treatment in any way.

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APPROVAL

I have read the information described above and I have been informed by the undersigned doctor. I learned about the purpose of the treatment / procedure to be performed, its causes and benefits, risks, complications, alternatives and additional treatment attempts. I am signing this form consciously without the need for additional clarification and without being under any pressure.

I authorize a person named to give consent and to receive all kinds of information about my treatment when I lose consciousness in any way or when I am unable to give consent for the attempts to be made to me regarding my treatment (the person authorized by the patient must sign as the patient's representative/legal representative).

I accept the application of Turkish Law and the jurisdiction of Istanbul Courts in legal disputes that may arise as a result of the treatment I received at BHT CLINIC Istanbul Tema Hospital.

.....(Please write "I understood what I have read and I approve it")

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|---|-----------|----------------------------|
| Patient Name - surname (written by hand) | Signature | Consent Date / Time |
| | |/...../..... ..:..... |

If the patient is unable to give consent:

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|--|-----------|----------------------------|
| Patient / legal representative Name - surname (written by hand) | Signature | Consent Date / Time |
| | |/...../..... ..:..... |

Reason for the patient not to give consent (to be filled out by the physician):

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For the patient / legal representative whose name is written above, if the disease, the treatment / procedure to be performed, it's purpose, reason and benefits of this treatment / procedure, care required after the treatment / procedure, risks and complications of the treatment / procedure, alternatives of the treatment / procedure, treatment / procedure. If necessary, sufficient and satisfactory explanations were made about the type of anesthesia to be applied and the risks and complications of anesthesia. The patient / legal representative confirmed by signing this form of his own consent that he was adequately informed about the treatment / procedure.

Physician who will perform Treatment / Procedure Signature Date / Time

Name Surname:/...../..... ..:.....

Title: :

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Patient (If the patient has a language/communication barrier)

I have interpreted the explanation of the physician to the patient. In my opinion, the patient has understood my interpretation.

Interpreter

Signature Date/Time

Name - surname (written by hand)/...../..... :.....

You can apply to the Quality Management and Patient Rights Directorate during the day and to the Supervisor / Night Administration Supervisor at night for all your complaints about medical applications or any subject you want to mention.

* Legal Representative Guardian for those under guardianship, parents for minors, first degree legal heirs in their absence. Signing this consent (consent) document does not eliminate the legal rights of the patient.