

PURITY BRIDGE CLINIC
CHECKLIST for Lipofilling (fat grafting) Pre-operative



Recommendations around the time of surgery

- Clothing to wear to hospital – we recommend you wear comfortable and loose clothing with a button or zip top (such as a tracksuit)
- Keeping your skin clean – we recommend regular washing before and after surgery with tea tree wash
- Post-operative garment – a supportive (but not tight) garment is highly recommended after surgery to speed up the resolution of any swelling. This should be worn for 6-weeks and taken to the hospital on day of procedure.
- Looking after your dressings – your wounds will be dressed shower-proof padded dressings. These will need to be changed regularly as they usually become soaked through with wound fluid. It is normal for the small liposuction wounds to leak for up to a week after surgery. It is therefore a good idea to sleep with an old towel on your bed when you get home from hospital.
- Post-operative follow-up – you will have a check up with the nurse one week after surgery, and then a further appointment for the removal of tapes at 2-weeks and trimming of any stitch ends. Later follow-up will be arranged subsequently
- Take things easy & slowly after surgery. Gentle pottering about, no heavy lifting or jumping up and down for first 2-3 weeks
- Driving can be started at 1-2 weeks, and after 6 weeks you can get back to normal exercise
- Scar management – this will be discussed with you at your 2-week post-operative appointment. Regular moisturizing and massage of your scars is important, and silicone gel can help ensure your scars settle down as quickly as possible.
- Some people find using arnica very helpful for bruising and swelling

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Any form of surgery carries a degree of risk. An individual's choice to undergo a surgical procedure is based on the perception and balance of risk and benefit. Although the majority of patients do not experience complications, it is important to consider them carefully in relation to how they might affect you if you were in the position to experience one (or more). If you have any questions or doubts you must discuss these with your plastic surgeon and postpone surgery until you are happy. Lipofilling procedures essentially are composed of two parts – the liposuction part (to "harvest" the fat) and the actual fat grafting part. Therefore the terms are used where appropriate (and sometimes interchangeably) below:

EARLY COMPLICATIONS (WITHIN THE FIRST WEEK OF SURGERY)

Dizziness and fainting

Some people can feel dizzy after the procedure. It is important to drink plenty of fluids after surgery to ensure you are well hydrated.

Patient initials

Bleeding (haematoma)

If there is any suggestion that significant bleeding into the surgical site has occurred after surgery you will need to go back to the operating theatre to have the wound washed out to evacuate the collected blood.

Patient initials

Infection

Rates of severe infection in liposuction are low. However, minor wound infections or inflammation may occur. Minor wound infections are dealt with using special dressings and antibiotics where appropriate. If a major infection develops, it might be necessary to go back to the operating theatre to wash out the wound. In severe cases, more than one return trip to theatre may be required, as well as the use of a specialised dressing

Patient initials

Blood Clots

Blood clots in the veins of the legs (DVT - deep venous thrombosis) may occur after liposuction, which is why important preventative measures are taken (calf compression stockings, pneumatic calf pumps and blood thinning injections whilst in hospital). You should continue to wear the calf compression stockings for 2-weeks after discharge from hospital. If a DVT does develop, you will need various investigations and treatment as appropriate. A pulmonary embolus (PE) describes a blood clot that has broken off from the DVT and lodged in the blood vessels in the lungs. This can be serious, and again, appropriate investigations and treatment is instigated should this be suspected after your operation.

Patient initials

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Seroma

Normally excess wound fluid comes out of the small wounds as described above. Unusually, there are occasions when the body continues to produce this fluid for some time and the fluid can accumulate in the surgical site, known as a seroma. If this occurs, you may experience discomfort and there is a chance that the fluid can become infected. Therefore, should you develop a seroma, it may be necessary for it to be drained. This involves a fine needle being passed into the area and the fluid sucked out. The aspiration may need to be repeated on more than one occasion depending upon your situation.

Patient initials

Fat necrosis and oil cysts

If the blood supply to the transferred/grafted fat is not sufficient to keep the fat alive, the fat will not survive – it is at risk of dying, or undergoing “necrosis”. If mild, this may simply present itself as areas of firmer scarring or mild lumpiness – these usually settle down with massage and time. If more severe, oil cysts can develop which, if uncomfortable or causing a problem might need to be drained using a needle, or sometimes surgically removed. In the most severe, but fortunately unusual, cases of fat necrosis, a secondary infection can take hold, requiring a range of measures that can include antibiotics and even surgical washouts.

Patient initials

Swelling

You should expect to be swollen after surgery. Whilst much of the swelling will have reduced by 6-weeks, it can take many months for all the swelling to completely resolve. Your final result cannot usually be judged until 1-year after surgery/

Patient initials

Under- or over-correction

Under- or over-correction may occur: if an area is under-corrected it may be possible to redo the liposuction, but a period of several months after the first operation may need to elapse to allow the internal scarring and swelling to settle down. If there are any small contour irregularities from overcorrection, a combination of careful refining further liposuction with fat transfer into the area may be considered

Patient initials

Damage to internal organs

An uncommon, but dangerous complication is the damage to internal organs by the liposuction instrument during liposuction to the abdomen. If this were to happen, further surgery may be required to explore and repair the organs damaged. As stated, this is a very unusual complication, however extremely serious

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Fat embolism

Another uncommon complication is fat embolism - fat entering the blood stream and lodges at a distant site in the body. If this is in the lungs it can be extremely serious and has been recorded as a cause of death following liposuction.

Patient initials

Further procedures

In order to minimise the risk of fat necrosis (see above) it is important not to put too much fat in any one location at a single sitting. The judgement about how much is safe, is a clinical decision, and one taken at the time of surgery. Therefore it is common to require (or desire) more than one fat grafting procedure to achieve the final desired outcome. Frequently up to 3 procedures are performed.

Patient initials

Coronavirus and COVID-19

The Coronavirus Disease (COVID-19) global pandemic has had an impact on all of our lives. Despite the anticipated “worst” of the disease and the consequences being allegedly over, the disease still exists and can have an impact on surgical and non-surgical procedures. The disease can be acquired in the community and in healthcare settings, and it is impossible to determine accurately how someone might have caught the disease. It is therefore important that you appreciate that if you develop COVID-19 following your procedure, it is not possible to determine whether you caught it during your treatment (e.g. from medical staff or the clinical setting) or whether it was acquired elsewhere.

Furthermore, if you are an asymptomatic carrier of Coronavirus (even if a recent test for Coronavirus has been negative), there is evidence that symptoms can develop after a surgical procedure, particularly with a general anaesthetic. This risk must be acknowledged and accepted if you are to proceed with treatment. Should symptoms develop they could impact on your post-surgical recovery, and even require transfer or admission to an NHS hospital.

Patient initials.....

I acknowledge that I have read and understood the nature of a lipofilling operation. I have read the information provided to me and I understand the potential risks and complications associated with this procedure. I agree to follow the postoperative care instructions given to me, including attendance at the postoperative follow up

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appointments, compliance with instructions to stop smoking/nicotine products (when relevant) and cessation of exercise and heavy lifting during the recovery after surgery. I agree to communicate any concerns I may have in a timely manner and to inform my surgeon of any changes in my health or circumstances that may affect my suitability for, or recovery from lipofilling surgery.

- **I, the undersigned, acknowledge that I have read and understood the nature of liposuction surgery. I have read the information booklet provided to me and I understand the potential risks and complications associated with this procedure.**
- **I further recognise that during the course of an operation, medical treatment or anaesthesia, unforeseen conditions may necessitate different or additional procedures. I therefore authorise my surgeon and attendant medical staff to perform such procedures as deemed necessary by their professional judgement that are in my best interest.**
- **I consent to the administration of such anaesthetics considered necessary and advisable. I understand that all forms of anaesthesia involve risk and the possibility of complications.**
- **I acknowledge that no guarantee has been given by anyone as to the results that may be obtained.**
- **I agree that all has been explained to me in a way I understand regarding the procedure(s), risks, potential benefits and possible alternative treatments.**

Patient signature

Patient name

Date

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