PTOSIS SURGERY (BLEPHAROPITOSIS) INFORMED CONSENT FORM

The purpose of this form is to raise awareness about your health issues and to ensure your participation in the decision to be taken.

While this form has been defined to meet the needs of most patients in many conditions, it should not be considered a document that includes the risks of all treatment modalities. Depending on your personal health situation, your doctor may give you different or additional information.

After learning the benefits and possible risks of diagnosis, medical treatment and surgical interventions, it is up to you to accept or not to accept the applications. Except for legal and medical obligations, you can refuse to inform or withdraw consent at any time.

What is droopy eyelid?

A droopy eyelid is a problem that can be unilateral or bilateral, often congenital, but can also be encountered during the developmental period. It can appear in forms ranging from very light dimensions that can only be understood when looking carefully, to very prominent dimensions that prevent the person from seeing. Sometimes, when the eyelids are in better condition at the beginning of the day, drooping eyelids may occur with muscle fatigue over time.

When congenital causes and a neurological problem coexist; Difficulty in swallowing, double vision and some weakness in the facial muscles may accompany droopy eyelids. Very rarely, tumors originating around the eyes can also cause droopy eyelids. Sometimes, droopy eyelids may be due to previous accidents and traumas around the eyes. In order to understand what the problem is, a detailed examination and a good history should be taken.

Transaction Description

After measuring the muscles that lift and operate the eyelid, the surgical technique is decided. Surgery is often performed under sedation and local anesthesia. Rarely, general anesthesia may be required. In order to prevent bleeding during and after the operation, aspirin should not be used for 10 days before the operation. If the patient has significant medical conditions and medications that he or she constantly uses, the physician should be informed.

After blood tests and necessary preparations are made, the muscles that lift the lid are revealed with an incision on the lid. The surgery is terminated by some operations performed on these muscles or by some operations that connect the lid muscle and the eyebrow muscle. If the eyebrow needs to be connected with the eyelid, then this operation is performed with the fascia connective tissue to be taken from the leg.

After the operation, ice is applied to the operation area and the edema is tried to be controlled. Antibiotics and pain relievers are used. In order to prevent stinging and burning in the eyes, emollient pomade or drops are used. In the first days after the procedure, bruising and swelling around the eyelid is an expected situation. Usually, from the third day after the surgery, pain, tension and swelling begin to decrease. 3rd-4th postoperative day. The stitches on the eyelid are removed around the same day. If there is an incision on the eyebrow, the stitches here are removed on the seventh day, if there is an incision on the leg and the tissue is removed, the stitches here are removed after about two weeks. In the first weeks, glare, stinging and burning are problems that can be seen.

Risks of the Transaction

Bleeding: Although rare, with bleeding problems during or after surgery can be encountered. If bleeding occurs after surgery, emergency drainage treatment may be required. Bleeding

The use of aspirin or similar painkillers should be stopped ten days before the surgery, as they increase the risk of injury. Hypertension that is not under medical control can also cause bleeding during or after surgery. Bleeding under the eyelids can delay healing and cause bad scarring.

• **Infection**: Infection is usually not expected after this surgery. Although rare If infection develops, additional antibiotic therapy or surgical intervention may be required.

Blindness: Blindness after eyelid surgery is extremely rare. However, surgery Bleeding into the eye during or after surgery can cause this. Whether this situation cannot be predicted.

Bad Scar (Scar) Remaining: Although good wound healing after surgical intervention Although expected, abnormal scarring may occur in the eyelids and deeper tissues. These scars are They may be of a different color than leather and may not look nice. It is possible to form small skin cysts due to visible scars or stitches on the eyelid. Additional treatment may be required.

Damage to Deeper Structures: After the surgery, more damage such as vessels, eye muscles and nerves deep tissues may also be damaged. The potential for this may vary depending on the type of blepharoplasty surgery. These damages can be temporary or permanent.

Dry Eye Problem: Permanent disorder of the eyelid that causes decreased tear production can be seen after surgery. This is rare and unpredictable. Normally, patients with dry eye problems should be especially warned when considering eyelid surgery.

- Corneal Exposure Problem: In some patients, after surgery, the eyelid There may be difficulty in closing and this may cause corneal problems due to dryness. Asymmetry: Normal human face is asymmetrical. As a result of eyelid surgery, both sides There may be variation between
- **Surgical Anesthesia:** Both local and general anesthesia carry risks. Any type of surgical anesthesia or sedation has a risk of complications, damage, and even death.
- Unsatisfactory Results: There is a possibility that eyelid surgery will not give good results. It, It carries risks such as unacceptable visible deformities, loss of function, wound deterioration (cracking, splitting) and loss of sensation. Another problem that may occur after surgery is related to the adjustment of the valve distance. Sometimes 1–2 mm differences may occur. If the difference is very large, a new may require intervention.
- Allergic Reactions: There are very rare cases of local allergy to the tapes, suture materials or drugs used. More serious systemic reactions may develop with drugs used during or after surgery. Allergic reactions may require additional treatment.
- **Delayed Healing:** Wound dehiscence is also extremely rare. However, a surgical site It can be encountered in the case of trauma or diabetes, radiotherapy history and cortisone use.

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Diagnosis Treatment/procedure to be applied Side/grade if applicable
I hereby declare that; My attending physician informed me about my disease, the treatment option to be applied,

My attending physician informed me about my disease, the treatment option to be applied, its duration, advantages, success ratio, the fact that it does not necessarily guarantee the recovery of current status, period of healing, potential risks and complications, alternative techniques, the potential situations I will experience on the condition that I reject the treatment and compulsory performance of an additional operation/intervention/procedure if deemed necessary and s/he answered all my questions regarding these matters.

Above mentioned procedure has been disclosed to be performed on myself/patient I legally represent by the physicians, nurses as well as other healthcare professionals under the authority, surveillance and control of my attending physician.

I have been informed that if required, anesthesia will be performed by an anesthetist, sedation will be performed by an anesthetist or another physician competent in sedation and local anesthesia will be performed by my attending physician.

While being entitled to make decision and think straightly, I accept the medical procedure to be performed, and consent that my attending physician and his/her team will carry out any medical treatment option/surgical technique/intervention they deem to be necessary.

I authorize the hospital to examine, inspect, dispose of or keep the tissues or organs removed during the procedure for which I have consented above.

I allow my medical reports to be used for scientific researches provided that my identifying information is kept hidden.

Patient's				
Full Name:	Signature:	Date:	Time:	
Date of Birth:				
Legal Representative's				
Full Name:	Signature:	Date:	Time:	
Degree of Relationship:			00000000000000	
Reason why the consent is delivered by legal representative of the patient:				
☐ Patient is not conscious	☐ Patient is under	r 18		
☐ Patient is not entitled to make decision	□ Emergency			
Witness'				
Full Name:	Signature:	Date:	Time:	
Informing Physician's	ACAD PROPERTY AND A STATE OF S	9000 1 10	17.75.7	
Full Name:	Signature:	Date:	Time:	
Interpreter's (If required)				
Full Name:	Signature:	Date:	Time:	
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Informed consent is delivered by the patient himself/herself if s/he is older than 18 years old, by the patient himself/herself together with his/her legal representative if the patient is aged between 15 and 18 and by the representative of the patient if the patient is under 15 years old and/or is unconscious and/or is not entitled to make decision and in case of emergency.