

CONSENT FOR SURGERY

CHIN POINT RESHAPING (Genioplasty)

A genioplasty is a common procedure carried out in a number of clinical situations. The clinical indication for this procedure is to move the chin point to a more favourable position.

The technique most commonly used under General Anaesthetic involves an incision in the mouth between the lower incisor teeth and the inner aspect of the lower lip.

The bony chin point is then mobilised and moved to its new position. The bone is then secured in this new position with the use of small titanium plates and screws. These are usually permanent fixtures although in a small number of cases (approximately 5%) another procedure may be required to remove these fixtures.

Any type of surgical procedure is at risk of complications and these should be considered prior to surgery.

It is important that you read this information carefully and completely. **Please initial each page**, indicating that you have read the page and sign the consent for surgery as proposed by your surgeon.

1. Dissatisfaction with the aesthetic result:

Although every attempt is made to produce a result which pleases the patient, this is not always possible. Some patients are dissatisfied with the results of cosmetic surgery and may not feel enough has been achieved or alternatively the appearance is not what they desire. The human face is normally asymmetrical. There can be a variation from one side to the other in the results obtained from a chin procedure. It is likely that you will feel small irregularities in the lower border of the jaw line where the bone cuts have been made.

2. Scarring:

A small incision will be made in the mouth. This scar will be hidden inside the mouth. Infection or unsatisfactory healing may lead to a more noticeable or tight scar.

3. Swelling & Bruising:

Some bruising always occurs on the lips, mouth, face and neck. This settles over a six week period.

Bruising may spread down onto the chest.

4. Damage to adjacent structures:

There is a low risk of permanent paraesthesia (numbness) resulting from damage to sensory nerves at the chin point. This does not lead to any loss of movement. There is a low risk of damage to teeth roots which could result in root canal treatments or tooth loss.

5. Bleeding:

It is possible, though unusual, that you may have a problem with bleeding during or after surgery. Should post-operative bleeding occur, it may require emergency treatment to stop the bleeding, or rarely require a blood transfusion.

6. Infection:

Infection is quite unusual after surgery. Antibiotics will be given in a one-off dose at the time of the operation. Should an infection occur, additional treatment, including antibiotics, might be necessary.

7. Wearing of a retainer or denture after the procedure:

It is possible that a retainer or denture may have to be adjusted by your dentist after this procedure. It is important to protect the wound inside your mouth from trauma. Meticulous oral hygiene is required. Normal tooth brushing and use of an antiseptic mouthwash is usually enough.

8. Anaesthesia:

The procedure is normally performed under general anaesthesia (in other words you will be asleep). Your anaesthetic will be performed by a Consultant Anaesthetist.

9. Revision surgery:

In most cases a satisfactory result is produced and revision surgery is not required. In some patients abnormalities may persist after the initial operation and revision surgery is required to produce a satisfactory cosmetic or functional result. Revision surgery will only be offered if your surgeon thinks an improvement is possible and your expectations are reasonable.

I have had the opportunity to discuss these complications and any questions with my surgeon.

Signed (patient) Date

Signed Mr J J Downie FRCS Consultant Surgeon

