Facelift Consent



The purpose of a facelift (rhytidectomy) is to improve visible signs of aging in the face and neck by tightening underlying facial muscles, removing excess skin, and repositioning facial tissues. This procedure is performed to achieve a more youthful and refreshed facial appearance while maintaining natural contours.

Understanding the Risks and Benefits

I understand the goal of this surgery is to improve facial skin tightening. I also understand that:

- Surgery has no quaranteed outcome.
- Risks may include pain/discomfort, bleeding, infection, scar, facial weakness, numbness, asymmetry, hair loss, skin irregularities, skin damage/death, hematoma, seroma, saliva leakage, persistent skin laxity, neck banding, incomplete resolution, persistent jowling, need for additional procedures.
- Rare but serious risks include major complications or even death.

Alternatives to Surgery

I understand that I have options, including:

- No treatment
- Botox
- **Dermal Fillers**
- RF skin tightening
- CO2 Laser treatments
- Microneedling
- Fat Transfer

Each has its own risks and benefits, which have been discussed with me.

Patient Acknowledgment

I've had the chance to ask questions, and all answers were clear. By signing, I agree to have the procedure done and understand everything explained above.

Post-Operative Instructions

Following these instructions will help your healing process and reduce the chance of complications:

What to Expect After Surgery

- Numbing in face or neck: It is normal to have numbness/tingling of the neck or face after surgery. This may take weeks to months to resolve.
- Brusing and swelling: Some bruising and swelling is normal. This should gradually improve over time
- Fevers for the first few days: A mild fever can be a normal response to surgery and inflammation. Low-grade fevers (below 100.4°F or 38°C) are usually not a cause for concern.

When to Call the Office or Visit the ER

- Severe pain that is not controlled by the pain medication prescribed
- Severe or worsening swelling and bruising
- Severe bleeding
- Fevers above 100.3 F

Wound Care

Empty drainage bulbs: If drains were placed, empty the bulb twice daily. After emptying squeeze, the bulb and replace the stopper to maintain suction. Record the output mL lines on the bulb.

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Kevin Caceres, MD

1615 Pasadena Ave South Suite 220 Saint Petersburg, Florida 33707 Phone (727) 870-3223 Fax (727) 870-4223

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MRN:

Patient Name: DOB:

Facelift Consent



- Apply antibiotic ointment: Apply antibiotic ointment to your incisions 2-3 times daily
- Wear compression garment: Wear your neck compression garment 24-hours a day (except when bathing) for the first
 week after surgery. Wear your neck compression garment at least while sleeping (ok for 24/7) for the second week after
 surgery.
- Ear lobes- do not pull on or play with ear lobes
- **Keep the Incision Clean and Dry**: Use mild soap and water if instructed and pat the area dry with a clean towel. Do not soak incisions.
- Dressings: Keep the wound covered as recommended to protect it from bacteria and dirt.
- Avoid Picking or Scratching: Do not pick at scabs or scratch the incision area, as this can lead to infection and increased scarring.

Activity Restrictions

- Rest: No heavy lifting (over 20 lbs), vigorous exercise, or bending for 2 weeks
- Return to normal slowly: Most take about 1 week off work/school
- No driving if taking narcotic pain meds

Medications

- Prescription pain meds: Take only as needed.
 - o If pain is tolerable, take **Tylenol** instead of the prescription. Follow the Tylenol bottle to dose.
- Antibiotics: Take as prescribed and finish the full course.
- Other medications: Follow instructions carefully.

Avoid Smoking & Alcohol

- No smoking: Slows healing and increases risks
- Avoid alcohol: For at least 2 weeks, as it interferes with healing and medications

Scar Care (if applicable)

- Scar treatments: You may be advised to use silicone sheets, scar creams, or ointments once the incision has healed
- Massage: Gentle massage can reduce scar tissue buildup
- Sun protection: Keep the area covered or use sunscreen to prevent darkening of the scar

Follow-Up Appointments

- Attend all appointments with Dr. Caceres to monitor healing
- Report any unusual symptoms: Redness, warmth, drainage, or worsening pain

Patient Acknowledgment

By signing below, I confirm that:

- I have read or had this form explained to me
- I understand the risks, benefits, and alternatives
- I agree to follow all post-operative instructions
- I consent to the procedure by Dr. Caceres and his team

Patient / Agent / Guardian Signature	Witness Signature	
Date Signed		

Kevin Caceres, MD