

New Patient Consultation- Breast Thursday, December 2nd, 2021

Name: Taya Faber

Age: 42 **Height:** 5'6" **Current Weight:** 135

BMI: 21.84 **Highest Weight:** **When:**

Medical History:

Surgical History: None

Medications:- Fluoxetine: 40mgs daily, 60mgs daily during luteal phase - Traxodone: 25mg as needed for sleep quality -

Fluticasone propionate nasal spray: daily

Social History: Packs per day. If quit, when . Recreational Drugs: Occasional marijuana edibles

Allergies: Dust mites, amoxicillin, sulfa meds

Women: Period: 14 Gravita: 0 Para: 0 Menopause: NA Last Mammogram:

Chief Complaint:

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HPI:

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VITALS: BP: 109/73. HT: 66. WT: 135. O2: 98%. HCT: 13.3

Current Bra Size:

Breast Exam:

Area	Right Breast	Left Breast	Notes
Symmetry			
Chest/Skeletal			
Upper Poles			
Cleavage			
Ptosis			
Appearance			
Implant Position			
Previous Scars			
Nipple Sensation			
Nipple Projection			
Areola Appearance			
IMFs			
Capsular Contracture			
Masses			
Additional Notes			

Breast Measurements:

Area	Right Breast	Left Breast
Volume		
Areola Size		
Base Diameter		
SN-N		
N-IMF		
N-IMF Incision		
Height		

Surgical Plan:

Breast	
Body	
Liposuction	
J Plasma	

Fat Grafting	
Additional Notes	
Time	
Implants	
Mesh/ADM	
Exparel	
Other Supplies	
Hormones	
Smoker	
Blood Thinner/DVT	
Physician Orders	
Previous Report Needed?	

Additional Comments:

Counseling:

My recommendations for this patient were reviewed. Discussed that the results of surgery cannot be guaranteed and that there is always the potential for postoperative revision. Discussed that scar quality cannot be predicted and contour irregularities may occur. Discussed that at the time of surgery, the doctor may decide not to perform all or part of the planned surgical procedure, at their medical discretion. We discussed that surgery is a tradeoff between the goal of an improved contour or aesthetic outcome against the risks of surgery and a permanent, significant, and visible scar. Future changes to the appearance of the body due to weight fluctuations or aging following the surgery are unpredictable. Options such as anesthesia methods, surgical methods, and incisions were discussed. Anesthesia options were discussed. Potential complications include, but are not limited to, the following were discussed: Bleeding, infection, asymmetry, excessive swelling, poor scarring (which may require surgery to correct), changes in the color of the skin, skin laxity, wrinkles, delayed healing, systemic health issues, embolic phenomenon, DVT, allergic reaction to one of the substances used in the operation or post-operatively and other problems were discussed. Furthermore, should injury occur, additional treatment, surgery and/or hospitalization may be required and at additional cost that may, or may not, be covered by insurance. Expectations about postoperative pain management and medications, potential need for drains, garment wearing, activity restrictions, and return to work were discussed. The patient was given the opportunity to ask questions.