

## Informed consent form

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## PATIENT INFORMATION AND CONSENT FORM PENIS ENLARGEMENT SURGERY

(lengthening by cutting the suspensory ligament, thickening by fat injection, fat removal around the penis and opening of the penoscrotal web, if any)

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PALIENLS	NAME.	SURNAME	•

AGE:

DATE OF INFORMATION:

ADDRESS:

This form will inform you about the risks, process and results of PENIS ENLARGEMENT surgery and enlighten you about alternative treatments. Please read it carefully, sign each page, ask your doctor if you have questions or do not understand the points.

This operation is performed to increase the length and thickness of the penis and to correct other deformities (penoscrotal web: a skin curtain like a bat wing that starts under the tip of the penis and extends to the testicles, or buried penis: excessive fat accumulation around the base of the penis). Thickening of the penis is usually achieved by fat injection under the skin of the penis and lengthening is achieved by cutting the suspensory ligament of the penis. At the end of the operation, there will be a zigzag-shaped or inverted "Y" shaped suture mark on the skin due to the lengthening on the dorsal part of the base of the penis.

If there is a penoscrotal web and it is opened during the operation, there will be a zigzag stitch mark on the lower part of the penis. These zigzagged scars are due to z-plasties performed to lengthen the skin. The scar that will remain on the lower part of the penis and testicles is not very prominent as a feature of the skin of that area. If there is fat accumulation around the base of the penis, this fat mass is also removed by liposuction (vacuum fat removal).

**ALTERNATIVE** TREATMENT

The only surgical way to lengthen the penis is to cut the suspensory ligament. Non-surgical methods of lengthening by weight-binding or lengthening with vacuum pumps are also non-surgical methods. For thickening, dermis grafts (living part of the skin), alloderm (fabricated skin tissue) or thick living tissue leaves (flaps) can be used in addition to fat tissue.

BEFORE **SURGERY** 

The anaesthetist will evaluate the patient before surgery. He will examine and ask some questions. He/she will carry out the tests and investigations he/she deems necessary to avoid any problems. Tell your doctor if you have a known or suspected disease (such as heart disease, high blood pressure, diabetes), a symptom or an allergy (such as to medicines, medical materials such as plasters or food). Describe any previous operations, procedures or medical problems.

## **ANESTHESIA**

This operation is performed under anaesthesia. general In the operating theatre, the patient's heart rate and blood oxygen level are continuously monitored by electronic devices during the operation. Allergy or drug reactions to the materials used are rare and can be fatal. Moreover, people who are sensitive to these substances cannot be identified in advance by routine tests. However, when these undesirable conditions occur under hospital conditions, they can be successfully treated and the likelihood of harm to the patient is extremely low. **OPERATION** 

Before general anaesthesia, the patient will not eat or drink anything for 6-8 hours with an empty stomach. After the operation, nothing will be given by mouth for at least 4-6 hours. These periods can by the be changed patient's doctor. The duration of the operation lasts 1.5 - 4 hours depending on the procedure to be performed. After the operation, the patient is usually monitored in the waking room for 1 hour and then sent to his/her room. However, if there are nausea and similar problems due

**PROCESS** 

**POSSIBLE RISKS ASSOCIATED** WITH SURGERY

to anaesthesia, the duration of stay may be prolonged.

As after any surgery, there may be some undesirable conditions (complications) after this operation. Infection, bleeding, asymmetry, melting of the injected fat tissue, loss of stabilisation in the penis (more movement of the penis from left to right), loss of sensation, necrosis may occur.

In order to reduce the likelihood of problems, antibiotics, painkillers and other medications recommended by the doctor should be used without interruption after the operation, and the dressing or bandage should be applied regularly. In case of any problems related to the surgery, the doctor who performed the surgery should be consulted first, since he/she is the person who can best evaluate the source and solution of the problem. Smoking and tobacco use adversely affects tissue circulation and increases the possibility of all problems that may occur.

## RISKS OF LIPOSACCHIN (VACUUM FAT REMOVAL) AND FAT INJECTION (in buried penile deformity)

Patients with loose skin, reduced skin tension, other medical problems (such as diabetes, heart disease, collagen tissue disease, vascular disease), unrealistic desires (such as a very fat patient expecting ideal body measurements) are not suitable for this surgery. Postoperative infection (inflammation) may occur. Most of the time it improves with dressing and medication. However, this may lead to skin shrinkage and contour disorders. precautions are taken against the risk Necessary There may also be haematoma (blood collection) in the operation areas. In order to prevent bleeding during the operation, a special bleeding-reducing solution is injected into all liposuction areas and then the procedure begins. If a haematoma is formed, subsequent intervention (such as insertion of tubes called resistors through the cannula holes) may be required to drain it. If bleeding is excessive, it may be necessary to give blood. Swelling and bruising are expected in the relevant areas after the operation. These may last for several weeks.

Seroma (serum collection) may also occur at the operation site. There is no risk of this. It is usually absorbed back by the body after a while.

Although it is a very weak possibility, an allergic reaction to the drugs and suture materials used may develop. In this surgery, sensory disturbances, fluctuations, collapses, heights, symmetry disorders between the two sides may occur. These may be temporary or permanent. There is a risk of malfunction of another organ or vessel (embolism) as a result of fat escaping into a large vessel opened in liposuction (vacuum fat removal) surgery. When this embolism travels to the brain, heart and lungs, it can lead to serious conditions that can lead to death. This risk is minimised by administering an anti-bleeding and vasoconstrictive solution (tumescent technique) to the operation area before the procedure. Skin loss complication of is another very rare liposuction. The fat melts a little in the area where it is injected. The fat injection may need to be repeated. As far as it is known, melting can be up to 40% of the injected volume. In order to reduce the possibility of problems, antibiotics, painkillers and other medications recommended by the doctor should be used without interruption, dressings, bandages and special corsets should be applied regularly. In case of any problem related to the surgery, the doctor who performed the surgery should be consulted first, since he/she is the person who can best evaluate the source and solution of the problem. Smoking and tobacco use adversely affect tissue circulation and significantly increase the possibility of all problems that may occur.

PATIENT CONSENT

My doctor told me about my problems, the type of treatment to be performed, my surgery, alternative treatments, risks and complications I might encounter. He gave me the opportunity to ask any questions I had. I understand that I can be given serum and, if necessary, blood during the operation. I know that I can be operated again under anaesthesia if complications that may require surgical procedure develop. I know that if surgical procedure is required due to complications, I know that I will have to pay the hospital costs of these additional surgical procedures.

I understand that tissues and organs may be removed from me during the operation to remove excess skin and soft tissues, to be used in another area (called graft or flap) or for pathological examination.

I understand that scars will remain after the operation and that they will not disappear for life. I agree to do what is recommended (massage with special creams, application of silicone sheets) to keep these scars as minimal and as good as possible. I authorise the taking of medical pictures and videos of me before, during and after the operation. I understand that these pictures and videos may be shown to other doctors for medical and scientific purposes. I understand that no payment will be made to me for the use of these images and videos in medical publications (articles or books). I understand that there are also risks associated with general anaesthesia, that these are the responsibility of the anaesthesiologist, and that I will be explained separately and a form will be signed.

As a result, I understand that I am not guaranteed the outcome of this operation, that there is a possibility that the expected result may not be achieved for various reasons, and obtained than that even worse results may be the current situation. This consent form may contain errors or omissions. If I have any questions about this form or the surgery, I know that I can consult my doctor via my doctor's e-mail address (oytunmd@gmail.com), mobile phone (+90 533 5690649 and +90 505 2965569) and whatsapp (+90 533 5690649).

Information about the Covid-19 pandemic: I have been informed that the surgeries were performed during the covid-19 pandemic but by taking all necessary precautions. Despite all these precautions, knowing that I can get covid-19 infection outside the hospital, I agree to be operated by taking the risks into consideration.

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to	me	in	detail	by m	ny	doctor	Op.	Dr.	Oytun	idil	with	my	own	consent	and	without	any
inf	fluen	ice.															

Date:	*********			/	•••	/	2023	
Patient's		na	me			surname:		
Signature:	(please	sign	by	writing	"I	READ,	I	UNDERSTOOD")

Relative/witness, name and surname:
The patient has signed the form in my presence, awake and conscious.
Signature: