

When can I go back to work?

This depends on how many areas of the body you have had treated. Some people may be able to return to work the next day, but most people will take one or two days off. This is entirely up to you and you may return as soon as you feel fit to do so.

When can I resume daily activities?

Normal daily activities can be resumed as soon as you feel fit to do so, generally the day after the treatment. It is advisable to go for a few walks in the first few days after the procedure as this will assist drainage of fluid. Strenuous activity involving the area that has been treated should be avoided for about a month as your body continues to heal.

When can I go back to the gym or do any sport?

You should avoid vigorous activity (gym) or contact sport involving the treated area for at least four weeks. Mild exercise (cardio) can be resumed after about ten days if not involving the treated area directly. Be sensible and don't overdo it.

Compression Garments?

We arrange the compression garments and 4D vest for you. Generally we arrange 2 garments so you can wear one and wash one. We use VOE and they can also be ordered online at www.recovapostsurgery.com if you require more.

How long do I need to keep my garment on for?

For areas such as abdomen, chest, back, flanks, knees, inner/outer thighs please keep the surgical compression garment on for 2-3 weeks (24 hours a day) and then you should wear it a further 2-4 weeks for about 8-10 hours a day. The 4D vest should be worn for 3 weeks.

Will I have to change dressings?

The clinic will provide you with ample dressings to change over the first few days. This may be more than anticipated. You should stock up on absorbent or sanitary pads. You will need to change these 3 to 4 times a day in the first few days to soak up any leakage. Thereafter once a day will be sufficient. Essentially, as the dressings become soiled you can change them. It is wise to get a mattress protector or sleep on old towels.

What about drains?

Patients having their abdomen and flanks treated will most likely have drains inserted (short little silicone tubes). These will remain stitched in for 5-7 days and are subsequently removed at the clinic. You will have a removal appointment booked on the day of your treatment.

How long does the swelling normally last for?

Although most of the swelling and bruising usually resolves after 4-6 weeks the final results of surgery may not be fully realised for 4-6 months. This may vary between patients.

What can I do to reduce the swelling?

We recommend that you attend manual lymphatic drainage (MLD) sessions as soon as possible after the treatment (within the first few days, even with drains). You can arrange appointments prior to having the procedure with practitioners in your local area. Practitioners can be found on www.mlduk.org.uk.

Antibiotics and painkillers?

You will be given a course of antibiotics to take for 2-3 days to minimize the risk of infection. Painkillers you should only take if and when necessary (1-3 days).

Can I travel/fly/drive a car after my procedure?

It is advisable not to drive straight away and take an alternative method of transport or arrange for someone to collect you. You may however start driving 24 hours following the procedure. You should not have flown 48h hours before the procedure. You can fly after about 10-14 days providing you keep well hydrated and active on the flight. It is also advisable to wear anti-DVT compression stockings.

Risks

Pain

You may experience some pain and discomfort post operatively and are advised to take regular painkillers to manage this effectively. A prescription of painkillers will be given to you to take home on the day of discharge.

Bruising and swelling

Bruising and swelling will be apparent for approximately 1-2 weeks post operatively. This will gradually subside and is dependent on how your body responds to surgery, as some people tend to bruise more easily than others. A compression garment must be worn for 4 weeks post operatively. This will be provided on the day of surgery. This helps reduce swelling and supports the areas treated whilst healing. Some people request two garments so they can alternate while washing one garment.

Infection

Infection is very rare, but occasionally occurs following any type of surgery therefore it is important that you recognise any signs of infection such as localised redness, swelling, heat, pain, pus or feeling unwell/ feverish and report it to the clinic as soon possible. Antibiotics are given to you on the day of discharge to reduce the risk of this happening. However, inflammation to the scar lines is to be expected.

Wound healing

Most puncture sites heal within 5-7 days postoperatively. However, some require more time to heal and do heal more slowly. More attention may have to be given to these wound sites, therefore regular checks with your nurse will be organised and thoroughly planned. **Smoking will delay wound healing,**

Scarring

Scars are initially pink and lumpy and gradually fade and become less obvious over time. Once the wound is completely healed, massage in a circular deep motion with Vitamin E oil, Bio oil or Silicon gel (Dermatix or Kelo-cote) can improve the texture and appearance of the scar. There is a slight risk of keloid scars forming. These are lumpy raised thick scars, which are more common in Afro Caribbean patients. This depends on how your body normally reacts to scarring.

Seroma

This is an obvious swelling or accumulation of fluid caused by inflammation. It can occur 1 -2 weeks following surgery. Treatment is by simple "aspiration", which may be repeated until further re-accumulation ceases.

Altered sensation

Some patients experience a change in sensation following a surgical procedure. This is due to disruption of the fine nerves supplying the skin. Usually full sensation returns gradually over several months. Itchiness and hypersensitivity may also be experienced.

Panniculitis

This is a reactionary inflammatory skin condition that is documented in post-liposuction literature. Although rare it is a risk can leave permanent resultant purplish discoloured lesions.

Deep vein thrombosis

There is a risk of deep vein thrombosis with all types of surgery and this risk increases with the time spent in theatre, To reduce this risk it is important to remain as mobile as possible soon after surgery. HRT and the contraceptive pill also increase this risk this should be discussed with your surgeon.

Secondary Lymphoedema

Lymphoedema (swelling of the limbs due to poor fluid drainage) can occur as a secondary complication if the tiny lymph vessels are injured. This may be temporary or longterm. If there is pre-existing sluggishness of the lymph system this is more likely.

Fat Embolism syndrome

This occurs when small globules of fat enter the blood stream and find their way into the lungs and possibly into the heart and brain. Consequences may include respiratory failure or multi-organ failure. It happens most commonly with traumatic bone fractures or orthopaedic procedures. It can occur with aggressive procedures and large volume liposuction.

Conscious sedation patients will need a responsible adult (known to them) to accompany them home and stay with them for the following 24 hours

MLD – Manual Lymphatic Drainage

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MANUAL LYMPHATIC DRAINAGE FOLLOWING VASER LIPOSUCTION

The lymphatic system is responsible for removing excess fluid or “swelling” and waste/toxins, including dead and damaged cells or “bruises” from our bodies.

The lymphatic vessels are very similar to the blood vessels in our bodies and are located through a vast network. However, unlike the blood, it is a one way system and doesn't circulate the body with the heart pumping the blood instead it has to rely on a natural rhythm. This rhythm can be forced to speed up with **Manual Lymphatic Drainage** and hence made to work much more efficiently.

After Vaser Liposuction the area “swells”. This is a natural response as the body produces a “cushion of fluid” around the “damaged” area so it can be protected while it heals itself. Wearing a compression garment limits the amount of fluid “swelling” that is produced.

The lymphatics will gradually remove the swelling plus any dead blood cells or “bruises”. Because we are all unique the time it can take varies. However, sometimes the lymphatic system can become overwhelmed and can't remove the excess fluid or “swelling” quickly enough. Pockets of fluid become trapped causing hard uneven areas. The application of **Manual Lymphatic Drainage** causes the lymphatic system to work more efficiently thus helping to prevent this happening. If it does occur, **Manual Lymphatic Drainage** encourages the hardness to disperse and the body to remove it naturally.

To have the full benefit of **Manual Lymphatic Drainage** after Vaser Liposuction it is best to receive a treatment as soon as possible after the procedure; this can even be on the same day. If there are drains, another session following their removal would be beneficial and in some cases a further follow up treatment may be necessary.

To find a fully qualified therapist www.mlduk.org.uk

How often should I have MLD?

Day 1 postop -----> **Day 3/4** -----> **Day7/8** then space them less frequently

Hi Def patients will require a more stricter regime



Consent for VASER® LipoSuction & Micro Lipo

Areas/s to be treated:.....

I understand that LipoSelection only by VASER® is an elective minimally invasive surgery procedure to remove body fat from specific area(s) of the body. The procedure has been explained to me in a way that I understand. I have had the opportunity to ask questions, and my questions have been answered.

Patient signature.....

The following alternative methods of treatment have been discussed with me:

.....

It is my decision to proceed with VASER® Liposelection although the alternative treatments may yield more optimal results. I acknowledge that no guarantee has been given by anyone as to the results that I may obtain. Although a good result is expected, I understand that there are risks to the procedure or treatment proposed.

Patient signature.....

Possible occurring risks (this list is not all inclusive):

Bleeding	Bruising	Infection
Abscess	Allergic Reaction	Numbness
Asymmetry	Altered sensation	scar retraction/ tethering (e.g. nipple)
Dimpling	Permanent Irregularities	Skinburns
Chronic pain/discomfort	nerve injury (weakness)	Seroma (fluid collection)
Scarring (raised or stretched	Unpredictable Result	No effect on bloating
chest and abdominal perforation	(hyper/hypopigmentation	DVT
Panniculitis	skin laxity, wrinkling	skin discoloration
need for re-treatment	Lymphoedema	Lipoedema progression
Fat embolism syndrome	Death	

Patient signature.....



I consent to the administration of such anaesthetics considered necessary or advisable. I understand that all forms of anaesthesia involve risk and the possibility of complications, injury, and sometimes death. I consent to the disposal of any tissue, medical devices or body parts which may be removed. Having discussed the reasonable expectations of LipoSelection only by VASER® with me and answered all of my questions to my satisfaction, I hereby authorize Dr Dennis Wolf and assistants to perform LipoSelection only by VASER® and any other procedure(s) that in their judgement may be necessary or advisable should unforeseen circumstances arise during surgery (incl. hospitalisation and further surgery).

Patient signature.....

With my signature below I hereby consent to having VASER® LipoSelection & Micro-liposuction. I understand that the practice of medicine is not an exact science and although good results are expected there can be no guarantee as to the results. Treatments taken are not refundable.

I shall adhere to the aftercare instructions, specifically manual lymphatic massage, and understand that if I do not adhere to these instructions this may impair or affect my results. I shall also attend all the follow-up appointments as arranged and I understand that if I do not attend these appointments The Private Clinic or Dr Dennis Wolf shall not be held liable for any undesirable results or consequences.

I am not pregnant or breast feeding Patient signature.....

I consent to photographs being taken before and after the procedure for my medical records and I understand that Dr Dennis Wolf may use these for research, presentations, publication and marketing purposes. The identity of the patient shall under **no** circumstances be revealed.

Patient Name **Signature.....**

Date.....

I, Dr Dennis Wolf, certify that I or a member of my staff has discussed all of the above with the patient and that I have answered all questions regarding the Liposuction procedure. I believe the patient fully understands what I have explained and answered.

Surgeon **Signature**

Date



VASER® & MICRO LIPOSUCTION AFTERCARE

Day of procedure - there is no need to do anything. **DO NOT TAKE THE GARMENT OFF.** Openings are provided in the garment for ablution requirements. If there is leakage through the garment you can re-enforce with plastic backed absorbent sheets. Cover your mattress with similar or old towels.

Day 1 post-op – You will need someone to help you with this. Preparing for a shower –

LIE FLAT ON THE BED and slowly open the compression garment. You may feel faint so don't do this standing up. Remove all the soaked dressings and discard. Slowly move to a seated position and then to a standing position. You will still be leaking pink/red coloured fluid. Have a short shower. Don't use soap on the incision sites. **Redressing incisions** - Gently pat dry. Sanitary pads are useful for copious leakage. Use the swabs/gauze supplied for smaller amounts. Only cover the incisions that are leaking. There is no need to tape the dressings – the garment will keep it in position. Re-apply the compression garment. Change as often as you require once they are soaked. This may be once or more a day.

If you have been provided with a 4D vest or foam this needs to be placed onto the skin under the garment. Try remain active, but take it easy in the initial post-op period. Remaining upright will promote leakage of fluid. MLD sessions can be started day 1 post-op. If steri-strips have been applied try and keep these on for 5 days. If they accidentally come off replace them with a band-aid plaster. Remove them after 5 days. Don't have a bath until all incisions are closed.

Day 2 onwards - the incisions will slowly stop leaking. One side may stop before the other. Continue dressing with gauze or with sanitary pads. Keep the surgical compression garment on for the advised period,

DO NOT use hot or cold packs (hot water bottles etc) as these may scold you. Usually a short course of antibiotics is prescribed for 3-5 days. Take the anti-inflammatories as prescribed. The Co-codamol may make you feel nauseous, drowsy or constipated. Although this is a local anaesthetic procedure and there is no hospital stay required you should still take it easy and not overexert yourself in the first 1-2 days.

Return to every day activity as normal avoiding vigorous activity (gym) or sport for a 2-3 week period. It is important to be very mobile and active. Do not wear tight belts or trousers/dresses as they may create creases around the midriff. Sometimes you can develop quite uncomfortable post treatment inflammatory lumps. These are generally more common in larger treatment areas like the abdomen.

Gentle massage (MLD) together with wearing of compression garments will help with this. It is important to do regular self-massage and stretching a few times a day. Numbness, heightened sensitivity, and tingling are all part of the healing process and may be felt in the treated areas.

Remain vigilant and if you experience persistent or increasing swelling, skin redness or elevated temperature that may indicate infection, contact the clinic for advice. Patient on call nurse, 0800 170 1790