

Informed consent of the patient / legal representative:

RHINOPHYMA SURGERY

(Surgery of enlarged nasal tip)

Head physician: Senior consultant MUDr. Tomáš Fořt

Head anaesthesiologist: MUDr. Roman Baláž

Name and surname of the patient: _____

Insurance number: _____

I. Information about the nature of ailment:

The disease arises from the overgrowth of sebaceous glands and subcutaneous connective tissue on the nasal wings and tip of the nose, sometimes of monstrous proportions. In advanced stages, the patient cannot breathe through the nose and the condition is cosmetically unacceptable.

II. Information about the medical procedure:

The surgery is usually performed under general or local anaesthesia. After putting the patient under local or general anaesthesia, the swollen part of the nose is gently cut with a radiofrequency knife or laser. The resulting open wound is covered with sterile dressings. The operation takes up to 2 hours, the patient spends 2-6 hours in the postoperative room. Sterile dressings are required every 2 days for this type of procedure. The surgical wound epithelializes itself with the newly formed skin. This skin is never fully fledged and needs to be protected from cold and sun. Healing takes 1-2 months.

III. Risks of the procedure (general, individual):

There is a risk of postoperative early or late (day 5-14) bleeding, especially if the patient was taking salicylic acid or heparin drugs. In women, ongoing menstruation may cause bleeding. The surgical wound always heals with mild inflammation, as the nasal cavity is not sterile and contains physiological bacteria. The risk of general anaesthesia increases with age and the severity of the patient's other illnesses and includes possible unpredictable reactions of the body to the administration of drugs and other procedures associated with the procedure under general anaesthesia.

IV. Alternatives of the procedure:

So far, there are no conservative treatments. It is recommended to limit alcohol and coffee.

V. Answers to additional questions from the patient/legal representative:

(or indicate that the patient did not ask any additional questions)

Physician's representation:

I hereby represent that I have informed the patient/legal representative identified above in an understandable manner about the planned surgery, including information about potential complications. The patient/legal representative has been also informed about the planned method of anaesthesia, including information about potential complications associated with the procedure.

Date: _____ MUDr.: _____ Physician's signature: _____

Patient's / legal representative's consent:

I, the undersigned, hereby represent that I have been informed by the physician in an understandable manner about the planned surgery, including anaesthesia and including warning about potential complications. My additional questions (if any) have been answered. Having considered the provided information, I agree with the performance of the surgery procedure, including the described anaesthesia and including other procedures and measures, as long as the lack of such procedures and measures might immediately threaten the my/ the patient's health condition and life.

I agree to pay the price of disposable materials in the amount of _____ Kč.

Date: _____ Patient's signature: _____

In the case of incapacity of the patient, the document must be signed by his/her legal representatives (usually both parents, unless another method of legal representation is determined by the court. Then the relevant court order must be provided).

Legal representative 1:

Name and surname _____ ID. _____ Signature _____

Legal representative 2:

Name and surname _____ ID. _____ Signature _____