

## **INFORMED-CONSENT-SKIN GRAFT SURGERY**

### **INSTRUCTIONS**

This is an informed-consent document that has been prepared to inform you of skin graft surgery, its risks, as well as alternative treatments.

It is important that you read this information carefully and completely. Please initial each page, indicating that you have read the page and sign the consent for surgery as proposed by your plastic surgeon.

### **INTRODUCTION**

Skin graft surgery is frequently performed by plastic surgeons to use skin taken from another area of the body to restore skin coverage in other area(s). Skin grafts help wounds heal that otherwise would not heal adequately. Skin grafts are useful in situations where there is adequate subcutaneous tissue present to provide support and blood supply for the skin graft.

Skin grafts are generally classified as to the thickness of the skin that is being grafted from one part of the body to some other region. A "split-thickness" skin graft does not comprise the entire thickness of skin. The donor area where the split-thickness graft is taken can heal on its own. Large areas of the body can be used for split-thickness skin grafts. The "full thickness" skin graft is different as it involves the full thickness of skin and deeper tissues. Full-thickness grafts tend to be used for specific wound coverage applications when thicker skin is needed. The donor area for the full thickness graft is limited in size as full-thickness skin graft donor sites cannot be used more than one time.

Skin grafts are an effective means of assisting wound healing when there has been a loss of skin due to conditions that involve disease, injuries including burns, or surgical removal of tumors. Some wounds may be too complex to heal without other more involved reconstructive techniques. In some situations, surgical procedure(s) and other treatments (dressing changes and hydrotherapy) may be needed to prepare a wound for a skin graft.

### **ALTERNATIVE TREATMENTS**

Alternative forms of care consist of not undergoing surgery. Some minor wounds may heal without surgery. In other situations, different forms of treatment such as the transfer of skin and other composite pieces of tissue may be preferable to skin grafts. Microsurgical tissue transfer may be necessary in situations when ordinary surgical techniques cannot provide for satisfactory tissue to cover a complex wound.

Risks and potential complications are associated with alternative forms of treatment. Although wounds can heal spontaneously, there may be increased risk of unsatisfactory result, scarring, and functional impairment.

### **RISKS of SKIN GRAFT SURGERY**

Every surgical procedure involves a certain amount of risk and it is important that you understand the risks involved with skin graft surgery. An individual's choice to undergo a surgical procedure is based on the comparison of the risk to potential benefit. Although the majority of patients do not experience the following complications, you should discuss each of them with your plastic surgeon to make sure you understand all possible consequences of skin graft surgery.

**Bleeding**- It is possible, though unusual, to experience a bleeding episode during or after surgery. Should post-operative bleeding occur, it may require emergency treatment to drain accumulated blood (hematoma). Do not take any aspirin or anti-inflammatory medications for ten days before surgery, as this may increase the risk of bleeding. Non-prescription "herbs" and dietary supplements can increase the risk of surgical bleeding.

**Infection**- Infections after skin graft surgery may occur. Additional treatment may be required. There is the possibility of skin graft failure or scarring from an infection. Should an infection occur, treatment including antibiotics or additional surgery may be necessary.

**Itching**- Itching is a common complaint in both the skin graft donor location and the recipient location. Itching may be a chronic complaint. Graft abrasion may occur from scratching.

**Inability to heal**- Conditions that involve disease, injuries including burns, or surgical removal of tumors can produce severe wounds. Skin grafts require adequate blood supply for survival. Areas of the body where there is inadequate blood supply due to injury, disease states, or the effect of radiation therapy, may not be capable of providing adequate blood supply for skin graft survival. Skin grafts are also vulnerable to loss in disease situations where there is a propensity for chronic swelling or vascular insufficiency disorders. Some wounds may be of the extent and severity that skin grafts cannot produce closure of the wound and healing. More involved reconstructive surgical procedures may be necessary.

**Skin scarring**- Excessive scarring can occur. In rare cases, abnormal scars may result. Scars may be unattractive and of different color than surrounding skin. Scarring may limit joint and extremity function. Special compressive garments may be needed to help control scarring. Additional treatments including surgery may be necessary to treat abnormal scarring.

**Skin sensation**- Diminished (or loss) of skin sensation in the donor location for the graft as well as the location where the graft is placed may occur and not totally resolve after skin graft surgery. Skin grafts generally do not regain normal skin sensation. Injuries may occur secondary to this lack of sensation if the skin graft is subjected to excessive heat, cold, or physical force. Skin grafts placed in areas of decreased sensation are prone to injury and loss. Care must be given to avoid injury to these areas or complications may occur.

**Skin contour irregularities**- Contour irregularities and depressions may occur after skin graft surgery. Visible and palpable wrinkling of skin can occur. If a skin graft has been processed in a graft meshing device, it may heal with a pattern.

**Delayed healing** - Scarring and inadequate healing may occur in the location where the skin graft is taken for transfer to other parts of the body. Healing of the donor area may take unacceptably long periods of time. The donor area once healed may be prone to abrasions. The skin graft may heal abnormally or slowly.

**Color change**- Skin grafts and the skin graft donor location can undergo changes in color. It is possible to have these areas be either darker or lighter than surrounding skin. These changes can be permanent. Additionally, these areas may have exaggerated responses with changes in skin color to hot or cold temperatures.

**Inability to restore function**- In some situations, skin grafts cannot restore the normal function of intact skin or undamaged deeper structures. Although it may be possible to produce healing with a skin graft, there can be a loss of function. Additional treatment and surgery may be necessary.

**Patient failure to follow through**- It is important that the skin graft is not subjected to excessive force, swelling, abrasion, or motion during the time of healing or graft loss may occur. Skin graft donor locations are similarly vulnerable to injury during the healing process. Personal and vocational activity needs to be restricted. Protective dressings and splints should not be removed unless instructed by your plastic surgeon or hand therapist. Successful restoration of function may depend on both surgery and subsequent rehabilitation. You may be advised to wear compressive garments to control both swelling and scarring following skin graft surgery. It is important that you participate both in follow-up care and rehabilitation after surgery.

**Surgical anesthesia**- Both local and general anesthesia involve risk. There is the possibility of complications, injury, and even death from all forms of surgical anesthesia or sedation.

**Unsatisfactory result**- There is the possibility of an unsatisfactory result from skin graft surgery. This would include risks such as skin and soft tissue loss, wound disruption, chronic pain and loss of function. There may be unacceptable cosmetic deformities from skin grafts placed on visible portions of the body or in the skin graft donor areas. Abnormal color of skin graft and graft origin location may occur.

**Damage to associated structures**- Structures such as nerves, blood vessels, and soft tissues may be damaged during surgery.

**Allergic reactions**- In rare cases, local allergies to tape, suture material, or topical preparations have been reported. Systemic reactions which are more serious may result from drugs used during surgery and prescription medicines. Allergic reactions may require additional treatment.

**Skin cancer in skin grafts**- Skin cancer can rarely occur in skin grafts.

**Pain**- Chronic pain may occur very infrequently from nerves becoming trapped in scar tissue or from other causes after skin graft surgery.

**Buried surgical staples / sutures**- Sutures and staples used to hold skin grafts in place can potentially become buried under the skin during healing. Additional surgery may be necessary to remove buried staples and sutures.

**Lack of graft durability**- Skin grafts do not have the normal padding and durability of normal, undamaged skin. Skin grafts lack the normal ability of skin to resist ordinary abrasions and injuries.

### **ADDITIONAL SURGERY NECESSARY**

Should complications occur, additional surgery or other treatments may be necessary. Even though risks and complications occur infrequently, the risks cited are particularly associated with skin graft surgery. Other complications and risks can occur but are even more uncommon. The practice of medicine and surgery is not an exact science. Although good results are expected, there is no guarantee or warranty expressed or implied on the results that may be obtained.

### **FINANCIAL RESPONSIBILITIES**

The cost of surgery involves several charges for the services provided. The total includes fees charged by your doctor, the cost of surgical supplies, anesthesia, laboratory tests, and possible outpatient hospital charges, depending on where the surgery is performed. Depending on whether the cost of surgery is covered by an insurance plan, you will be responsible for necessary co-payments, deductibles,

and charges not covered. Additional costs may occur should complications develop from the surgery. Secondary surgery or hospital day-surgery charges involved with revisionary surgery would also be your responsibility. Health insurance may not completely cover the costs of surgery and rehabilitation. You may require more rehabilitation services than your insurance plan covers.

### **DISCLAIMER**

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However, every patient is unique and informed-consent documents should not be considered all inclusive in defining other methods of care and risks encountered when medical care is reasonable and directed at obtaining appropriate results. Your plastic surgeon may provide you with additional or different information which is based on all the facts in your particular case and the state of medical knowledge.

Informed-consent documents are not intended to define or serve as the standard of medical care. Standards of medical care are determined on the basis of all of the facts involved in an individual case and are subject to change as scientific knowledge and technology advance and as practice patterns evolve.

**It is important that you read the above information carefully and have all of your questions answered before signing the consent.**

### **CONSENT FOR SURGERY / PROCEDURE or TREATMENT**

1. I hereby authorize Dr. Scott M. Gayner and/or Dr. John P. Stratis and such assistants as may be selected to perform the following procedure or treatment:

#### **SKIN GRAFT SURGERY**

2. I recognize that during the course of the operation and medical treatment or anesthesia, unforeseen conditions may necessitate different procedures than those above. I therefore authorize the above physician and assistants or designees to perform such other procedures that are in the exercise of his or her professional judgment necessary and desirable. The authority granted under this paragraph shall include all conditions that require treatment and are not known to my physician at the time the procedure is begun.
3. I consent to the administration of such anesthetics considered necessary or advisable. I understand that all forms of anesthesia involves risk and the possibility of complications, injury, and sometimes death.
4. I acknowledge that no guarantee has been given by anyone as to the results that may be obtained.

5. I consent to the photographing or televising of the operation(s) or procedure(s) to be performed, including appropriate portions of my body, for medical, scientific or educational purposes, provided my identity is not revealed by the pictures.
6. For purposes of advancing medical education, I consent to the admittance of observers to the operating room.
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6. For purposes of advancing medical education, I consent to the admittance of observers to the operating room.
7. I consent to the disposal of any tissue, medical devices or body parts which may be removed.
8. I authorize the release of my Social Security number to appropriate agencies for legal reporting and medical-device registration, if applicable.
9. THE FOLLOWING HAS BEEN EXPLAINED TO ME IN A WAY THAT I UNDERSTAND:
  - a. THE ABOVE TREATMENT OR PROCEDURE TO BE UNDERTAKEN
  - b. THERE MAY BE ALTERNATIVE PROCEDURES OR METHODS OF TREATMENT
  - c. THERE ARE RISKS TO THE PROCEDURE OR TREATMENT PROPOSED

I CONSENT TO THE TREATMENT OR PROCEDURE AND THE ABOVE LISTED ITEMS (1-9).

I AM SATISFIED WITH THE EXPLANATION.

8. I authorize the release of my Social Security number to appropriate agencies for legal reporting and medical-device registration, if applicable.
9. THE FOLLOWING HAS BEEN EXPLAINED TO ME IN A WAY THAT I UNDERSTAND:
  - a. THE ABOVE TREATMENT OR PROCEDURE TO BE UNDERTAKEN
  - b. THERE MAY BE ALTERNATIVE PROCEDURES OR METHODS OF TREATMENT
  - c. THERE ARE RISKS TO THE PROCEDURE OR TREATMENT PROPOSED

I consent to the treatment and I am satisfied with the explanation.