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Smoking and Plastic Surgery

As your plastic surgeon, I have discussed with you the importance of COMPLETE smoking cessation (abstinence) prior to your surgery for six weeks. Both major and minor cosmetic and reconstructive operations have been noted to be adversely affected by smoking. These operations include but are not limited to: facelift (rhytidectomy), tummy tuck (abdominoplasty), breast reduction, breast reconstruction, free-tissue transfer, flaps, grafts, and digital replantation (toe and finger reattachment). Even ex-smokers are at increased risk of wound healing problems.

Smoking can produce devastating complications of wound healing, infection, and death of skin flaps and of the tissues operated on. These complications of surgery are increased in the smoker and the ex-smoker. Additional treatment such as surgical debridement (excision of dead tissue), hospitalization, and additional reconstructive surgery may be necessary. Also, there may be financial responsibility that you may have to take on as a result of treating complications of surgery, should they occur. Third party payors (health insurance companies) generally exclude coverage for cosmetic surgery and complications arising from plastic surgery.

I have advised you to stop all smoking and all nicotine products for 6 weeks before surgery minimum. I also have advised you that you should not smoke or take nicotine products a minimum of 4 weeks after surgery. This post surgery length may be even longer depending on healing and any delay of healing. It is also important to avoid second hand smoke or passive smoke since it also has similar devastating effects on wound healing as if you were doing the smoking.

I prefer not to operate on smokers due to the potential risks of operations on smokers. If you have not quit smoking before surgery or do not plan on cessation of smoking after surgery please tell me. Surgery may have to be delayed, cancelled or rescheduled.

I acknowledge the above and have read all the above. I have completely quit smoking for the six weeks as advised by my doctor before surgery. I also have been advised on the importance of complete smoking cessation after surgery.

Signature _____ Date _____

Witness _____ Date _____