

FAT INJECTION

DR. GERUT'S PREOPERATIVE INSTRUCTIONS

IF YOU ARE HAVING ANESTHESIA

Patients are required to have preoperative blood tests or at least a urine test at their doctor's office or at the laboratory of their choice. The tests should be done no more than ten days before surgery and the results must reach the office no less than two days before surgery.

A MEDICAL EXAMINATION and **EKG** may be required before surgery. Please understand that if this is required, it is for your benefit and safety.

DO NOT TAKE ASPIRIN, BUFFERIN, APC, FIORINAL, ALKA SELTZER, ECOTRIN, EXCEDRIN, ANACIN, VITAMIN E or any other medication for two weeks before surgery except as prescribed by Dr. Gerut. **Even Advil, Motrin, Aleve, etc., check with Dr. Gerut or his office staff. If necessary you may take Tylenol.** Please check with the office if there are any questions regarding medication.

NO SMOKING for at least two days prior to surgery as smoking affects healing as well as lung function.

No more than one alcoholic drink per day as of one week before surgery as alcohol can cause excessive swelling.

PRE-OPERATIVE MEDICATION To be taken **BEFORE** surgery

(you will only need the items indicated by check mark):

- Zofran** – Anti-Nausea – Take with a TINY sip of water around 3 hours before surgery
- Vitamin K1** twice a day for 5 days before surgery (not morning of surgery).
- Multivitamin 1** daily
- Vitamin C** 1000mg daily for 5 days before surgery
- Phisoderm** Wash face twice daily before surgery. This is VERY important to avoid infection

Please stop **ALL** natural or holistic medications as they may interact with your prescribed medications and anesthesia. The one exception is arnica in moderate doses.

If you are having anesthesia: Nothing to eat or drink after midnight the night before surgery. Nothing to eat or drink the morning of your surgery. It is not necessary remove nail polish and/or nail wrap.

Please wear loose fitting clothing that buttons or zippers down the front and low shoes or sneakers.

Please tell us if you have ever been on Accutane, blood thinner, birth control pills, thyroid medicine or other hormone pills.

Please tell us if you have ever had any skin conditions such as cold sores, shingles, herpes, etc. as you will need special medicine before surgery to avoid a serious outbreak.

Do not wear make-up, perfume, cologne or body moisturizer on the day of surgery.

If you are having anesthesia, arrange for someone to pick you up at the office after surgery and to stay with you at home for a few hours. Please bring their phone number with you.

Please think about where on your body you wish us to remove the fat from.

If you develop symptoms of illness such as a cold or a cough, please call our office immediately at 516-295-2100.

I have been advised before my surgery of the following possible issues and complications (there are others that are not listed here):

Pain	Numbness	Disability	Infection	Bruising
Feeling tightness	Lumpiness	Swelling	Hematoma	Facial asymmetry
Change in facial expression		Need for revision	Changes in facial shape	
Prolonged healing time		New dimples / other marks	New wrinkles and/or lines	

X _____

It may be necessary for you to communicate with Dr. Gerut by text or email before or after your surgery. This communication may involve sending information about or photographs of yourself over the Internet from which you may or may not be identifiable. By your initials here you acknowledge and accept this potential breach of your privacy. X _____

If there are any changes in your medical condition between now and the day of your surgery PLEASE let us know.

If you wish to take any sedatives on the day of your surgery your consents MUST be signed in advance.

I have read the above instructions, my questions have been answered and I understand the instructions fully.

Signature

Date

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