

FEEL BEAUTIFUL

PLASTIC SURGERY

REQUEST and CONSENT FOR LABIAPLASTY (COSMETIC SURGERY OF FEMALE VULVA)

INSTRUCTIONS

Please become fully informed about labiaplasty surgery before proceeding with the operation. It is Dr. Laverson's responsibility to provide this information for you. It is your responsibility to become familiar with this information and to consider it when deciding whether or not to proceed. Read each paragraph completely. If you have questions or there are words you don't know, ask Dr. Laverson. Surgery is not an exact science. Because it is impossible to predict your outcome precisely in advance of the procedure, you should understand risks and possible complications of labiaplasty. Your signature below confirms your understanding and your request for cosmetic surgery of your labia / vulva / external genitalia.

INTRODUCTION

Labiaplasty is a plastic surgical procedure to adjust the anatomy and relationships of your vulvar (genital) structures to better match your lifestyle and your own personal preferences for comfort and appearance. There are many reasons women choose labiaplasty. Common indications are for increased physical comfort, for less self-awareness unclothed or in specific styles of clothing, to resolve distractions related to labial position or prominence, to improve shape and/or symmetry of the labii, to improve sexual confidence and/or sexual stimulation, to facilitate athletic performance or competition, to simplify hygiene, and others. The procedure is individualized for your anatomy and situation. Common changes are:

- Diminished size, length, thickness, and prominence of one or both labia minora (inner lips)
- Diminished size, length, and wrinkles of labia majora (outer lips).
- Increased clitoral exposure by reducing its skin cover
- Fat transfer or filler to puff the labia majora (outer lips)
- Removal of intra-vaginal hymen remnants that project excessively
- Labial reconstruction after birth trauma or after excessive / irregular removal in a past surgery

Although the procedure is individualized for each woman, labiaplasty is often accomplished by removing excess labia and surgically re-arranging remaining labial tissue to appear more trim, to appear completely normal, and to achieve your desired aesthetic outcome. Scars are usually inconspicuous, undetectable, or invisible. The procedure does not generally interfere with vulvar function (urination, menstruation, sexuality, childbirth) or change the delicate balance of moisture and vulva-vaginal flora.

Patients undergoing labiaplasty surgery must consider the following:

- Labiaplasty may not be a one-time surgery.
- Changes that occur to the vulva following labiaplasty may not be reversible.

ALTERNATIVE TREATMENTS

Labiaplasty is an elective surgical operation. Alternative treatment consists of not having the surgical procedure, non-surgical treatments, and/or avoiding situations that precipitate discomfort, self-awareness, or other problems. Risks and potential complications are also associated with alternative treatments.

RISKS OF LABIAPLASTY SURGERY

Every surgical procedure involves risk and the potential for unanticipated complications. If complications were completely predictable, they would never happen. The very nature of complications of surgery is that they are often unpredictable. The best we can hope for is to understand the most likely complications, try our absolute best to avoid them, and manage them expeditiously and successfully when they do occur. It is also important that you understand limitations of your labiaplasty procedure.

Inherent Risk of Labiaplasty Procedures

Bleeding, bruising, swelling, scarring, infection, pain, skin discoloration, asymmetry, delayed healing, dissatisfaction with results, removal of excessive labia, removal of insufficient excess labia, need/ desire for revision surgery, change in sexual function, others.

CONSENT FOR LABIAPLASTY SURGERY

1. Dr. Steve Laverson and designated assistant(s) are hereby requested and authorized to perform upon me a surgical procedure to reduce the size of the enlarged folds of skin and mucous membrane (labia minora, nymphae, inner lips) of my vulva (external genitalia) and/or to accomplish specific changes in labial appearance that I desire. The operation, entitled "labiaplasty," will trim my labia and/or change the size and/or appearance of my genitalia permanently. The labia minora may be less prominent. Adjacent areas may also be changed as requested, and only as I have requested, including skin over the clitoris, labia majora (outer lips) reduction or augmentation, hymen remnants, perineal skin, etc. Labiaplasty is a procedure commonly performed by Dr. Laverson and is established world-wide as effective treatment.
2. A good result from labiaplasty is expected, but is not guaranteed. Surgery is an inexact science. Dr. Laverson has not promised a specific outcome, or in any way offered a guarantee.

Healing for days to weeks after labiaplasty is part of recovery toward a good result. During this time, swelling of the labia, bruising, and some spotting may be noted for days to weeks. Minimal areas of numbness are usually temporary. Swelling to the point of distortion for several days following labiaplasty is common, and should be expected.

3. Labiaplasty requires suture placement in the central part of the labia minora, extending toward the urethral opening (meatus), and just in front of the vaginal opening. Sutures may also be placed at sides of the labia minora (inner lips), between labia majora and labia minora (between inner and outer lips), and along the edge of the entire labia minora (inner lips). "Hoodectomy," for increased clitoral exposure requires sutures across the middle, in front of (but not on) the clitoris. Labia majora reduction sutures are hidden in the crease between inner and outer lips.
4. There are risks associated with labiaplasty, and with all surgical procedures. Some of the more common complications during labiaplasty and recovery include, but are not limited to: hematoma (localized collection of blood or blood clot), infections, itching, poor wound healing, need for re-operation or revision, change in sensation, and others. There is a possibility that too much labia will be removed, and removed labia is un-replaceable. There is also a possibility that too little labia will be removed, and removal of more tissue will require additional surgery. Asymmetry between right and left sides is possible. Sexual function is often improved by labiaplasty, but this cannot be guaranteed. Sexual stimulation depends on

multiple factors, and may be diminished as a result of labiaplasty or independently of the procedure. To minimize the chance of complications, frank communication with Dr. Laverson about your motivation for and expectations from labiaplasty is important. After labiaplasty, careful hygiene of the perineum, protection from trauma, and abstinence from sexual intercourse for four to six weeks (or until it is comfortable) is recommended. Problems during the post-surgical healing period should be brought to Dr. Laverson's attention. Other complications and problems not mentioned above are possible, but less likely.

5. Photography is essential medical documentation before and after cosmetic surgery, and is an important part of health care. Genital photographs may be used for medical, scientific, and/or educational purposes, provided personally identifiable information (my name) is NEVER associated with the pictures.
6. Dr. Laverson will be notified immediately of any problems or concerns, whenever they arise. My final result doesn't become apparent until at least three months following my procedure. I understand the most important office visits happen at that future time. Committing to labiaplasty surgery implies my agreement and commitment to follow up 6 -12 months after the procedure.
7. Although the decision to proceed with labiaplasty is mine, my sexual partner or significant other is aware that I am having the procedure, and we are both aware that there will be a period of sexual abstinence afterward. Dr. Laverson is hereby released from any and all liability associated with emotional and other consequences of this hiatus, as well as unanticipated complications of this procedure. I have no known significant emotional disorder presently.
8. Personal hygiene, especially genital cleanliness, is important to minimize the chance of infection. Application of antibiotic ointment and daily gentle showers and/or baths may be recommended.
9. Smoking cigarettes may interfere with healing, and increase the chance of complications.
10. My convalescent status will include rest for approximately 2 days after surgery, and no immediate return to exercise or stressful physical activity. Riding a bicycle, horseback, and other activities involving the potential for direct impact upon the vulva and perineum will be avoided until healing has progressed sufficiently to support these activities, usually four to six weeks. I agree to withhold sexual intercourse for about five weeks following surgery, or until sexual activity proceeds without significant discomfort.

I have read this document completely, I understand it, and my questions have been answered to my satisfaction. This consent for labiaplasty surgery is signed without duress in the presence of a witness whose signature appears below.

The specific changes in labial appearance / situation I desire is / are:

Patient Signature

Date

I have personally witnessed that the above patient has read this document, or agreed to sign without reading. Questions have been answered to her satisfaction.

Witness Signature

Date