

Informed consent for cosmetic surgery
(10HDC00509, 27 February 2012)

Plastic surgeon ~ Facial rejuvenation surgery ~ Information ~ Informed consent ~ Record keeping ~ Rights 6(1)(b), 7(1)

In 2008, a 49-year-old woman travelled from a rural location to a major city to discuss her options for facial rejuvenation surgery with a plastic surgeon. During the 45-minute consultation, the plastic surgeon took the woman's medical history and examined her. He advised her that she was a good candidate for limited incision facelifting procedures such as the MACS-type (minimal access cranial suspensionplasty). The potential risks of surgery were discussed.

The surgeon made no clinical record of the consultation, but wrote to the woman on the same day summarising the consultation and their discussions. In the letter, he stated that the MACS procedure would achieve the woman's goal of a fresher, more youthful, appearance. The letter quoted the cost of the procedure and an information pamphlet was enclosed. The letter did not advise the woman of the possibility that the surgery might not be successful and the options and costs for further treatment in that event.

Over the next two months, the woman and her husband sent several emails asking for further information about the proposed surgery. Their questions were mainly replied to by the clinic's office co-ordinator.

The woman signed and emailed a consent form for the surgery. Two weeks later, the surgeon performed an endoscopic brow lift, limited incision facelift, necklift, pinch lower blepharoplasty and upper eyelid blepharoplasty at a private surgical hospital. Two days after the surgery, the plastic surgeon wrote to the woman's GP to provide details of the surgery and postoperative management. He telephoned the woman three times in the immediate postoperative period to check on her progress. The GP removed the woman's sutures and staples.

Initially, the woman was satisfied with her recovery and the outcome of the surgery. However, four months after the surgery the woman became concerned by sagging of the surface skin on her cheek bones and contacted the surgeon's rooms for reassurance. The clinic's office co-ordinator advised that the final result would not be evident for at least 9–12 months.

The woman saw the surgeon for her postoperative review one year after the surgery. She told him that she was concerned by the outcome. The woman said the surgeon was not clear about the cause of the failure to achieve the anticipated results and that the consultation made her feel inadequate, humiliated and insignificant. The surgeon subsequently advised the woman that, to achieve the results she wanted, she would require further surgery under general anaesthesia at additional cost. The woman later had further surgery carried out by a different plastic surgeon.

It was held that the plastic surgeon did not, either at the consultation or in subsequent emails, give the woman an adequate explanation of the options available regarding facial rejuvenation surgery, including an assessment of the expected risks, side effects, benefits and costs of each option. The accumulation of defects in the informed consent process pointed to a pattern of sub-optimal provision of information. As a result, the surgeon breached Right 6(1)(b) of the Code. As the woman did not receive sufficient information, she was not in a position to make an informed choice and give informed consent. Therefore, the surgeon also breached Right 7(1).