



AMERICAN SOCIETY OF
PLASTIC SURGEONS®

Informed Consent

Extensor Tendon Repair Surgery

**INSTRUCTIONS**

This is a document to help you learn about flexor tendon repair surgery. You will learn about its risks and other treatments.

It is important that you read the whole document carefully. Please initial each page. Doing so means you have read the page. Signing the consent agreement means that you agree to the surgery you have talked about with your plastic surgeon.

GENERAL INFORMATION

Extensor tendons connect arm muscles to the hand and fingers. Tendons allow the muscles to move the wrist, hand, and fingers. Injuries to extensor tendons may affect the use of one's hand.

Injuries to the extensor tendons can be caused by cuts, pressure, and sprains. Sometimes, you may not be aware of an apparent injury. Aging and arthritis can injure the tendons. If a tendon breaks, it is not likely to heal without surgery. Partly broken tendons may or may not need repair, depending on how bad the damage is. Regaining use of a hand after an extensor tendon injury requires surgery. You may also need hand therapy to get the best results.

Major hand injuries can break extensor tendons and injure other parts of the arm, hand, or fingers. Blood vessels, nerves, bones, and other tissues may need repair. Some injuries might only show up during surgery.

OTHER TREATMENTS

The other way to deal with a damaged tendon is to let it heal without surgery and accept the change in how the hand works. It is likely that the hand may not work properly. Usually, there is no simple fix for an extensor tendon if more than a few weeks have gone by since the injury. At that point, you may need many surgeries to fix it.

RISKS OF EXTENSOR TENDON REPAIR SURGERY

Every surgery has risks that you should know about. Every surgery also has limits. Choosing surgery involves comparing the risks and benefits. Even if the extensor tendon is fixed, there may be problems like scarring, stiffness, or opening of the wound. You may need more surgery. Most patients do not have problems, but you should talk about them with your plastic surgeon. Make sure you know about all possible outcomes of the surgery.

Scars:

All surgeries leave scars. This surgery may leave long, obvious scars in the skin or deeper tissues that do not go away. Scars may be ugly, dark, raised, and red. They may even be itchy or painful. Some patients are prone to keloids—prominent, raised, red scars that remain. You may need further treatments like medication or surgery.

Infection:

Infection can happen after surgery. If you get an infection, you may need to return to the hospital for treatment. This could include antibiotics or more surgery.

Hematoma:

Bleeding after surgery can form a hematoma-- a local pool of blood outside the blood vessels. Normally this goes away on its own. If it does not, it may lead to healing problems and you may need to have a doctor drain the fluid.



Open Wound:

The wounds of an extensor tendon repair surgery can open. This is not a good sign. If this happens, more surgery or other treatment may be needed.

Change in Skin Feeling:

You could have a loss of feeling or change in feeling in the skin of the finger, hand, or arm after surgery. This may not get better.

Damage to Nearby Tissues:

The surgery might damage nerves, blood vessels, bones, or other tissues. The risk of this depends on the type of surgery and how it is done. You may need more surgery if this happens. Injury to nearby tissues may or may not get better.

Complex Regional Pain Syndrome (CRPS):

This is rare but can happen after the surgery. You may have CRPS if you have pain, swelling, redness, and more sensitivity. CRPS may get better on its own. If it does not, you might need further treatment.

Loss of Full Use:

Hand and arm injuries are often more than just a broken tendon. Not all injuries can be fixed. Even if they are, the hand or arm may never work normally again. Injuries to other tissues or scarring may limit tendon function even after repair. You may need other surgeries to repair or cover damaged tissues. Some injuries may be so bad that the full use of the arm is not likely to come back. There may be problems to other parts of the hand and arm after hand injuries. You may need hand therapy after surgery to help you use your hand and keep from damaging the repair.

Tendon Scarring:

All injuries heal by scarring. Scarring can occur in the tendon itself or in nearby tissues. This may impact normal functioning. More surgery may or may not help reduce the scar tissue. Joints may also become stiff due to limited motion caused by scar tissue.

Failure of Tendon Repair:

Stitches hold the tendons together until they are strong enough. The stitches can break, or the ends of the tendon can come apart again because of pulling. This usually happens if the patient tries to use the hand before it heals. If the repair must be done again, the results are usually poor. This is because there is more scarring. Depending on the damage, a second repair may not even be possible. In such a case, it may take very detailed rebuilding to make the injured part usable. It is important to follow all instructions after surgery to protect the repair from damage. If you feel a “pop” or sudden pain in the area, call your surgeon at once.

Cuts Made by the Surgeon:

Broken tendons often come away from the wound. Because of this, your surgeon may need to widen the original wound where the tendon broke or make new cuts to reach the broken ends of the tendon.



DISCLAIMER

Informed consent documents give you information about a surgery you are considering. These documents explain the risks of that surgery. They also discuss other treatment options, including not having surgery. However, informed consent documents can't cover everything. Your plastic surgeon may give you more or different information. This may be based on the facts of your case.

Informed consent documents are not meant to define or serve as the standard of medical care. Standards of medical care are determined based on the facts involved in an individual case. They may change with advances in science and technology. They can also change with the way doctors practice medicine.

It is important that you read the above information carefully and get all your questions answered before signing the consent agreement on the next page.



CONSENT FOR PROCEDURE OR TREATMENT

1. I permit Dr. _____ and the doctor’s assistants to do the procedure **Extensor Tendon Repair Surgery**.
2. I got the information sheet on Extensor Tendon Repair Surgery.
3. I understand that, during the surgery, an unexpected situation may require a different medical procedure than the surgery listed above. I permit the doctor listed above, the assistants and/or designees to provide any treatment that my doctor thinks is needed or helpful. My permission includes all treatments that my doctor does not plan to do at the start of the surgery.
4. I understand what my surgeon can and cannot do. I understand that no warranties or guarantees have been hinted at or stated outright about the outcome of the surgery. I have explained my goals. I understand which outcomes are realistic and which are not. All my questions have been answered. I understand the surgery’s risks. I am aware of other risks and possible issues, benefits, and options. I understand and choose to have the surgery.
5. I agree to the anesthetics that are needed or helpful. I understand that all types of anesthesia have risks and may result in complications, injury, and even death.
6. I am aware of the serious risks to my health when blood products are used. I agree to my doctor using them if my doctor, assistants, and/or designees think they are needed or helpful.
7. I agree to the disposal of any tissue, medical devices, or body parts taken out during or after surgery. I also agree to any additional surgeries or treatment that is needed or helpful.
8. I agree to have parts of my body photographed or televised appropriately before, during, and after the surgery for medical, scientific, or educational reasons, if the pictures do not reveal my identity.
9. For medical education, I agree that onlookers can be in the operating room.
10. I permit my Social Security Number to be given to the right agencies for legal reasons and medical device registration, when necessary.
11. I agree to the charges for this surgery. I understand that the doctor’s charges are separate from the charges for the hospital and the anesthesia. I understand that there may be more charges if more procedures or treatments are needed or helpful. I agree to those charges, if any.
12. I understand that not having the surgery is an option and that I can opt-out of having the surgery.
13. IT HAS BEEN EXPLAINED TO ME IN A WAY THAT I UNDERSTAND:
 - a. THE ABOVE SURGERY TO BE PERFORMED
 - b. THERE MAY BE OTHER SURGERIES OR TREATMENT OPTIONS
 - c. THERE ARE RISKS TO THE SURGERY

I CONSENT TO THE SURGERY AND THE ITEMS THAT ARE LISTED ABOVE (1-13).
 I UNDERSTAND THE EXPLANATION AND HAVE NO MORE QUESTIONS.

 Patient or Person Authorized to Sign for Patient Date/Time

Witness _____ Date/Time _____