

ABDOMINOPLASTY EVALUATION -PATRICK HUDSON MD PA, PLASTIC SURGERY

PATIENT SIDE (FRONT) - **please answer all questions and Fax (505 242 0060) or bring with you**

1. Today's date: _____ 2. Your name: _____
3. How old are you? _____ 4. Are you married? married single
5. What is your job? _____
6. What best describes your problem (you can circle more than one)? loose skin excess fat weak abdominal muscle
other (describe): _____
7. How tall are you? ___ feet ___ inches 8. How much do you weigh? _____ lb.
9. Do you exercise regularly? **no yes (describe)** aerobic/running weight machine free weights
10. Have you recently lost weight? **no yes (describe)** How many pounds ___ over how many months _____ ?
11. When you were obese as a child or teen? **no yes**
12. Have you had an eating disorder like anorexia or bulimia? **no yes**
13. Have you had surgery of the abdomen? **no yes (describe)**

14. Have you had liposuction before? **no yes (describe when and what area)**

15. Have you ever had a blood clot? **no yes (describe)**
16. Do you smoke? **no yes (describe how many each day)** _____
17. Are you exposed to second hand smoke? **no yes**

Women patients only:

18. How many children have you had? _____
19. Do you plan any future pregnancies? **no yes**
20. Do you take birth control pills? **no yes**

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Patient name: _____

DR. HUDSON WILL COMPLETE THIS PAGE (BACK) - DO NOT ANSWER THESE QUESTIONS

General : ok problems **Stretch marks:** no yes **Elasticity of skin:** good poor
Scars: none Kocher Cesarean/Hysterectomy: transverse vertical other
Asymmetry: no yes **Fat:** nil significant upper abdomen lower abdomen hips
Muscle Tone: good poor **Rectus :** ok divarication (cm): 1 2 3 4 5 >5 **Umbilicus:** in out **Scoliosis:** Y N
Hernias: none felt umbilical midline femoral/inguinal other
Other: **General:** BP

RECOMMENDATIONS

ABDOMINOPLASTY: **PANNICULECTOMY :** transverse • fleur de lys
MINI-ABDOMINOPLASTY: alone • + suction • endoscopic
LIPOSUCTION: abdomen: upper lower both • hips • other

COMPLICATIONS

bruising • swelling • bleeding • infection • numbness • pain • thick scar • long scar • vertical or W-scar
asymmetry • poor healing • seroma • umbilicus position • fat or skin necrosis
comparison abdo-suction • limitations of mini
Liposuction issues:fat from upper abdomen moves to lower abdomen • liposuction not done with abdominoplasty
if liposuction needed there are further charges
OTHER: GA • No Guarantee • BCPs • thromboembolism (clots) • internet • 90% satisfaction
smoking • 2nd hand smoke

These issues were discussed with me by Dr. Hudson: _____ (patient initials) _____ (witness initials)

Date: _____