

Kimberly Cockerham, MD, FACS
Neuro-Ophthalmology
Eyelid/Orbital Oncology
Oculofacial Restoration

NEUROSURGERY			
Sanjay Ghosh, MD			
Scott P. Leary, MD			
Alois Zauner, MD			
Amanda Gumbert, PA-C			
Felix Regala, PA-C			
Cassie Petit, PA-C			
Deb Frantz, PA-C			

OTOLARYNGOLOGY/
HEAD & NECK SURGERY

Perry T. Mansfield, MD

Michael J. O'Leary, MD

Brian H. Weeks, MD

Brianna Harris, MD

Seerat Poonia, MD

Kimberly Cockerham, MD

R. Stuart Weeks, MD

Emeritus

Annette Kiviat, PA-C

Jeannine Shively, PA-C

OPTHALMOLOGY/ NEURO-ORBIT-PLASTICS Kimberly Cockerham, MD Cindy Ocran, MD

NEUROLOGY

Ian M. Purcell, MD, PhD

Monali Patel, MD

LOCATIONS

MESA COLEGE 7625 Mesa College Drive Suite 305A San Diego, CA 92111

CORPORATE & MAILING ADDRESS

MISSION VALLEY 3590 Camino Del Rio N Suite 100 San Diego, CA 92108 PH: 619-810-1111 FX: 619-229-4938

Patient Name:				DOB:	
Surgical Procedure:					
Surgical Procedure:	□Right Eye	□Left Eye	□Both Eyes		
	□Right Eye	□Left Eye	□Both Eyes		

#### INFORMED CONSENT FOR EYELID SURGERY

#### WHY ARE MY EYELIDS BOTHERING ME?

With age, the skin and muscles of the eyelid can sag and droop. In addition, the fat that surrounds and cushions the eyeball can bulge forward through the skin of the upper and lower lids. Excess skin, muscle and fat can weigh down the upper lid and in some cases block your vision. This can lead to fatigue, eyestrain, skin irritation, and loss of peripheral vision. Excess skin, muscle, and fat can also create what many feel is an unattractive, aged appearance, especially in the lower lids ("bags under the eyes"). The eyelids can roll in (entropion), roll out (ectropion), open more than they should (retract) or the muscle can weaken resulting in eyelid drooping (ptosis).

# WHAT IS DONE DURING EYELID SURGERY?

Surgery is performed to remove or reposition of the skin, muscle, and fat of the upper and/or lower lids. In the upper lid, the incision is made and hidden in the natural lid crease. For the lower lid, an incision can be made through the skin just beneath the lashes, or through the moist inside surface if the lid called the conjunctiva. There may be internal sutures that hold the deeper tissues in position.

# HOW WILL EYELID SURGERY AFFECT MY VISION OR APPEARANCE?

The results depend on your symptoms, unique anatomy, appearance goals, and ability to adapt to changes. Blepharoplasty only corrects vision loss due to excess skin, muscle and fat that blocks the eye. By removing this excess skin, muscle, and fat that blocks the eye, blepharoplasty of the upper lids may allow more light in and improve your peripheral vision. Blepharoplasty does not improve blurred vision caused by problems inside the eye, or by visual loss caused by neurological disease behind the eye. Reconstruction of the upper eyelid drooping (ptosis repair) will improve peripheral vision. Reconstruction of the eyelid for entropion, entropion or eyelid retraction will improve eye comfort and help minimize tearing and irritation.

- Because excess skin, muscle, and fat are consequences of aging, most patients feel that eyelid surgery even when done for medical reasons improves their appearance and makes them feel more youthful.
- Please understand that the primary objective in this surgery is to improve your ability to see.
- Please fully evaluate your goals and your ability to deal with changes to your appearance before agreeing to this surgery. Your doctor is committed to answering your questions and helping you achieve your goals.





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PLEASE INITIAL EACH OF	THE FOLLOWING	TO DOCUMENT	THAT YOU	HAVE
READ THIS CAREFULLY.				

# WHAT YOU SHOULD EXPECT AFTER EYELID SURGERY:

- You may need additional treatment or surgery to treat these complications; the cost of the additional treatment or surgery is NOT included in the fee for this surgery.
- Due to individual differences in anatomy, response to surgery, and wound healing, no guarantees can be made as to your final result.
- For some patients, changes in appearance may lead to anger, anxiety, depression, or other emotional reactions.



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I have:		
Received a copy of this Had all my questions an	consent	
This is an elective procedure comfortable with the healing		proceed with this surgery unless you are risks.
By signing below, I am confinanswered all of my questions with this surgery and future to	and that I understand as	ly Cockerham has nd accept the risks and the costs associated
Date	Time	AM/PM
Patient Signature		
Witness Signature		
Surgeon Signature	Dr. Kimberly Cockerb	am