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Plastic Surgery: Because it's your surgery, you should take the lead

By DR. ALAN MUSKETT
Plastic Surgery

I had this horrible dream the other night. I was in the hospital, doing a completely unnecessary operation. I operated on the wrong side, completely botched the procedure, caused a lot of bleeding and bumped off the patient. I staggered out of the hospital into a cacophonous thunderstorm, and a dark apparition appeared, thrusting a briefcase in my hand. Bewildered, I opened it, and there was \$18 million in cash. I woke up in a drenching sweat and related the dream to my wife, who said, "Honey, you can relax, you are NOT a Wall Street investment banker"

So you have an upcoming operation, say hip replacement, hysterectomy, prostatectomy or, hopefully, an extensive cosmetic procedure. What should you be doing as a patient to achieve the best possible outcome?

Principle No. 1 is to be a pest. Make sure you understand exactly what the procedure is, where it is and what the alternatives are. Ask to see diagrams, have the surgeon draw the incision on your body, and look at models together if appropriate. Taking the mystery out of surgical procedures also helps to reduce the anxiety. This stuff ain't rocket science, frankly, and if the surgeon can't explain it fairly simply, find one who can. I am a big believer in rapport. If you feel uncomfortable with the surgeon or have one who seems in a rush or distracted, keep shopping. There is no shortage of personable, skilled surgeons around here, especially, shall we say, mature plastic

surgeons that really ought to have their own TV shows.

Ask frankly about alternatives. Don't be afraid about annoying the surgeon, and don't be intimidated. The day of the God Doctor is over. You are the consumer; they are the provider, so make them earn their money. Ask about nonsurgical alternatives, and ask the surgeon to compare the results of surgical versus nonsurgical therapies. Am I more likely to be alive in 10 years if I have coronary bypass or if I take medication? Should I have medicine, radiation or surgery for my prostate cancer? How many patients after back surgery still have pain a year after surgery? How soon can you do my breast implants? (Product warning: gratuitous drop-in sentence.) You never HAVE to have an operation, so don't let anyone tell you that. Sometimes surgery is by far the best choice, but there are a lot of gray areas.

Get in shape for your operation. Studies have show that a month of preoperative exercise will improve postoperative outcome. You should run at least five miles a day prior to a hip replacement. Well, maybe that is not a good example. Who are you to question me? I'm a doctor. Anyway, it really works. If you can't walk, get in the pool and walk. Get a good month of workouts in and you will have fewer problems and recover more quickly.

I know everyone is totally saturated with the yap, yap, yap about smoking, but dude, just this once, check it out. Smoking just trashes the healing process. Spine surgeons watch their bone fusions melt away, and bone healing in general is severely impaired because nicotine and carbon monoxide squeeze off the tiny blood vessels that lead to healing. As plastic surgeons, we can't do facelifts, breast reductions, breast lifts, tummy tucks, or immediate breast reconstructions on smokers because the effect on skin flaps is so devastating. Smokers obviously have a lot more postoperative pneumonias and blood clots as well. Two months of cessation is preferable, but any time off is better than none.

A few quickies: If you have a history of urinary tract infections, get your urine checked a week before surgery so you don't get canceled out for that. Ask your surgeon about how they feel about aspirin, drugs like ibuprofen or any other blood thinner. Use an antibacterial soap the night before surgery. Ask about your prescriptions before

surgery to clear up any allergy or intolerance issues. If you get stuck with some brutally expensive drug, it is not illegal to call from the pharmacy and ask the doctor's office to substitute a generic. Ask about any dressing supplies that might be necessary post-op and get them in.

Many surgeons have nurses in the office who can be very helpful with postoperative questions. Try to identify that contact before surgery. While your surgeon might be very skilled, they may be clueless about your poorly fitting dressing bra, and besides, they're probably surfing the Internet looking for adult sized jammies with the attached feet.

Plan out your situation for once you are home. Will you need help? Will you need transitional care or a temporary nursing home? Is your spouse about as helpful as a cold sore? Get this figured out before your brain is full of Percocet. It is more useful for your grown son or daughter to come not for the surgery, but for the home care.

Discuss the financial arrangements with the doctor's office and the insurance company so you don't get hit with a big surprise. Don't dilly-dally on the preauthorization stuff. Take the stress off yourself by being prepared. Check the office tipping policy.

This improves your chances of being on the TV show.

The longer I practice (insert boring aphorism here), the more I believe in instincts. If you feel good about the procedure, it has been well-explained, and it makes sense to you in your metaphysical gut, go for it. Conversely, if you're not feeling good about something, it doesn't feel right, then don't do it. It is always your life, your body and your choice. A good surgeon has no problem seeing you for an extra visit in the office or calling your deadbeat son-in-law in California who watches a lot of medical shows.

Being a patient has become much less of a passive and more of a participative process. The success of your procedure has a lot to do with your planning and preparation.

Somehow, I don't think any of that \$700 billion bailout has your name on it.

Dr. Alan Muskett is a board-certified plastic surgeon at Billings Plastic Surgery. More information is available at www.billingsplasticsurgery.com.

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