

Supplemental Digital Content 7. Author's Surgical Approach to Primary Breast Augmentation

Description

Consultation

1. Thorough discussion of all implant options for surface texture, fill, and style/profile.
2. Review advantages and disadvantages of each option
3. Selection of implant type
4. Bio-dimensional planning using a modified High Five Decision Support Process
5. 3D simulation of implant and volume options
6. Final selection of implant is made
7. Review images to discuss patient asymmetries in:
 - a. Breast volume
 - b. Nipple position
 - c. Inframammary fold position
 - d. Ribcage contour
8. Review breast gap

Preoperative

1. Discussion of all risks, benefits and alternatives of surgery
2. Review preoperative instructions
3. Explain recovery process in detail

Operative

1. Preoperative markings in standing position
2. Preoperative intravenous antibiotic
3. Patient positioned supine with arms at 90 degrees
4. Wide preparation with draping
5. IMF markings confirmed in supine position
6. Infiltration of 30 cc of 0.5% lidocaine with 1/200,000 epinephrine
7. Preservation of the IMF by beveling up with electrocautery
8. Identification and careful elevation of lateral border of pectoralis muscle
9. Creation of submuscular plane
10. Division of inferior and inferior-medial attachments of pectoralis muscle
11. Examination with sizers
12. Pockets irrigated with triple antibiotic solution
13. Meticulous hemostasis confirmed
14. Infiltration of pocket with 10 cc of 0.25% marcaine with 1:200,000
15. Skin around the incision is re-prepped with betadine
16. Gloves rinsed with antibiotic solution
17. Implant rinsed with antibiotic solution
18. Insertion of implants using implant sleeve
19. Breasts examined in supine and sitting position

20. Two layer closure
21. Liquid adhesive and Steristrips™ applied
22. Post operative bra placed
23. Post operative hydrocodone/ acetaminophen, cyclobenzaprine, prochlorperazine
24. Postoperative oral antibiotics for 5 days
25. Postoperative breast massage initiated on POD #7

Postoperative

1. Scheduled follow up exams at 1 week, 1 month, 3 months, 6 months and 1 year
2. Review pictures with patients
3. Answer all postoperative questions/ concerns