

PRACTICE INFORMATION

Address

Practice / Name

Website URL Suite # City

Phone Fax E-Mail State Zip Code

BREAST IMPLANT REVISION

1. Do I qualify for breast implant revision?
2. How often do you perform this procedure?
3. Do you offer both saline and silicone gel breast implants?
4. Are you board certified? If so, by which board(s)?
5. How is this procedure performed?

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6. What are the typical results achieved by this procedure?

7. What are the potential risks and complications?

8. Does insurance cover breast implant revision surgery?

9. Where will my procedure be performed?

10. What type of anesthesia will I be given?

11. How long does breast implant revision surgery take?

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12. Is scarring prevalent?

13. Is there any downtime associated with this procedure?

14. Is this considered an outpatient or inpatient procedure?

15. Will I require special aftercare?

16. May I see before and after photos of breast implant revision surgery patients?

17. How long will it be before I return to my regular activities, including exercise?