

|  |
| --- |
| Guideline for providers of liposuction: consumer summary |
|  |
| OFFICIAL |

|  |
| --- |
| To receive this document in another format, phone insert phone number, using the National Relay Service 13 36 77 if required, or [email Private Hospitals & Day Procedures Unit](mailto:privatehospitals@health.vic.gov.au) <privatehospitals@health.vic.gov.au>.  Authorised and published by the Victorian Government, 1 Treasury Place, Melbourne.  © State of Victoria, Australia, Department of Health, August 2022.  ISBN/ISSN 978-1-76096-898-4  Available at [Guideline for providers of liposuction](file:///C:\Users\vicm6fw\Downloads\OneDrive_1_7-20-2022%20(1).zip) <https://www.health.vic.gov.au/private-health-service-establishments/guideline-for-providers-of-liposuction> |
|  |

# Contents

[Contents 3](#_Toc111452223)

[Liposuction in Victoria 4](#_Toc111452224)

[Who this guideline applies to: 4](#_Toc111452225)

[Assessing each patient 5](#_Toc111452226)

[Informed consent and shared decision making 5](#_Toc111452227)

[Facilities and equipment 8](#_Toc111452228)

[The liposuction procedure 8](#_Toc111452229)

[After surgery 8](#_Toc111452230)

[Combining procedures 9](#_Toc111452231)

[Quality and safety information 10](#_Toc111452232)

[Complaints and open disclosure 10](#_Toc111452233)

# 

# Liposuction in Victoria

Worldwide, liposuction is performed more than any other cosmetic surgery.It can be used to change the shape of many different body areas, including the neck, face, breast, arms, legs, chest or abdomen (belly). It is sometimes used to help reconstruct body parts that have been changed by illness, injury or surgery. There are a small number of situations where liposuction might be done in a public health service. However, most liposuction procedures are not offered by public health services, so are usually done in private health services.

Although often performed as a day procedure without an overnight stay in hospital, it is still a major surgical procedure with potential significant complications.

Liposuction is regulated in Victoria. This means there are rules about who can do it, where and how. If a procedure will remove more than 200ml of fat, it can only be done in a health service registered to do liposuction by the Department of Health.

# Who this guideline applies to:

All health services and health practitioners providing liposuction procedures where more than 200mls of fat is removed are expected to follow this guideline. The liposuction must be performed in a facility registered to do liposuction. It is also good practice for health practitioners and services providing and involved in any liposuction (including where less than 200ml of fat is removed) to follow this guideline to keep patients safe.

This guideline may change if and when there are changes to the law and regulations around liposuction in Victoria.

Deciding who can have a day procedure

Most liposuction is done as a day procedure. This means people go to the health service, have the procedure, and then go home, all on the same day. They do not stay overnight. However, some people are at higher risk of complications from liposuction and may need to stay overnight so they can be monitored for longer by health service staff. Some people also need to be in a health service that has more resources available if something goes wrong. These resources are most often found in health services where people can stay overnight.

Therefore, day procedures should only be offered to patients who are healthy, or have only mild health conditions, and are not at higher risk of complications during or after the procedure. Examples of reasons a patient should not have liposuction as a day procedure include:

* They have obstructive sleep apnoea.
* They have had complications with surgery or anaesthesia in the past.
* They have breathing or airway problems.
* They have a body mass index (BMI) over 35.

If patients with these features are planning to have liposuction, it should be done in a health service that is set up for an overnight stay.

# Assessing each patient

Medical practitioners should assess each patient carefully before the procedure. This helps ensure it is safe for the patient to have liposuction, and to make plans to keep them safe. The assessment should check, or ask questions about:

* Health conditions
* Body mass index (height and weight)
* Current medications
* Allergies
* Infections
* Skin problems
* Mental health and psychological issues
* Home environment
* Support available to the person at home after the procedure

This assessment should be done at least seven days before the procedure. Relevant checks and questions should also be repeated on the day of the procedure, to check if anything has changed (for example, a new infection).

People who have mental health concerns, including in how they feel about their body, should be referred for appropriate professional mental health support and approval before the liposuction is undertaken.

If a person is under 18, there are extra requirements. They must wait at least three months between asking for liposuction and the procedure being done (cooling off period). They must also be assessed by an independent psychologist, psychiatrist or general practitioner (GP), who decides whether the procedure is right for them.

Sometimes, the patient assessment will find reasons to delay a planned liposuction procedure. Examples include if the patient has:

* Any infections
* Flu-like or COVID-like symptoms
* Poorly controlled diabetes
* Chest pain
* Shortness of breath
* An irregular heart beat
* High blood pressure
* Had COVID-19 in the past 8 weeks, or has symptoms of ‘long COVID’
* Been vaccinated in the past two weeks, or has a vaccination scheduled within two weeks

Liposuction should be delayed for any person who meets any of the above criteria, until the problem has been investigated and resolved.

# Informed consent and shared decision making

Liposuction can result in complications, including life-threatening complications. Examples of possible complications include infection, blood clots, fat clots, damage to organs, medication reactions, and imbalance in body fluids and their contents.

Patients should be provided with enough information and explanation to make an informed decisions about whether to have a liposuction procedure, what procedure they choose to have, and what their care will look like. This includes information about:

* The training, qualifications and experience of the health practitioners involved. This includes both the person performing the liposuction, and anybody else who will be involved in the procedure, for example the person providing the anaesthetic.
* What the procedure involves.
* What the options and alternatives are.
* The expected outcome of the procedure.
* The risks and potential complications of the procedure (what could go wrong).
* How likely the risks and potential complications are, and what the consequences might be.
* What the patient should expect during recovery after the procedure.
* What the patient should do if they experience a complication, feel that something is not right after the procedure, or their recovery does not go as expected.
* The total expected cost of the procedure, including the cost of the person performing the procedure, the anaesthetic, fees and charges for equipment, materials and facility services, and hospital stay costs.

Patients should only be asked to sign a consent form after they:

* Have been given the detailed information described above in ways they understand.
* Have had all their questions answered to their satisfaction.
* Understand and agree to the content of the form they are signing.

A patient who agrees to liposuction can change their mind. They can decide not to go ahead with the procedure any time before the procedure starts. This includes the right to change their mind even after a consent form is signed and a booking is made. A patient who changes their mind and cancels a liposuction procedure close to the planned date may be required to pay some bookings costs due to the late notice. But they should not be charged any part of the fee for the actual procedure.

Health practitioner qualifications and experience

Different types of medical practitioners (doctors), with different qualifications, expertise and levels of experience, are allowed to do liposuction procedures in Victoria. All people performing liposuction in Victoria must be registered medical practitioners.

Medical practitioners must explain their qualifications, and level of expertise and experience (and those of any other health practitioners involved in the procedure) openly and honestly to patients, and ensure patients understand what this information means. Patients have the right to be informed about the qualifications, expertise and experience of health practitioners who will treat them, and to choose their health practitioners on this basis, if they wish.

Patients are encouraged to ask health practitioners about their qualifications, registration, expertise and experience.

Medical practitioners who do the actual liposuction procedure must be at least one of the following:

* A medical practitioner (doctor) who can show they have done a minimum of 100 liposuction procedures under appropriate supervision while learning, including at least five procedures on the body part they will be treating.
* A Fellow of the Royal Australasian College of Surgeons with a Fellowship in Plastic and Reconstructive Surgery.
* A Fellow of the Royal Australasian College of Surgeons in a different surgical specialty from Plastic and Reconstructive Surgery, or fellow of another specialist medical college, who has been trained in liposuction and is working within the boundaries of what their health service allows them to do.

Medical practitioners who do anaesthesia or high-risk sedation for liposuction must at least one of the following:

* A specialist anaesthetist (a Fellow of the Australian New Zealand College of Anaesthetists)
* In certain situations (e.g. remote geographical areas), a qualified GP anaesthetist who is a Fellow of the Royal Australian College of General Practitioners and/or the Australian College of Rural and Remote medicine, with specific additional training in anaesthesia.

Nurses involved in the care of patients having liposuction must:

* Have recent experience caring for people who are having surgery, including after surgery.
* Be knowledgeable and skilled in recognising when a person is becoming unwell.

In addition, all health practitioners (doctors and nurses) involved in liposuction treatment, even if they are not doing the actual liposuction procedure, must:

* Be registered with the Australian Health Practitioner Regulation Agency (Ahpra). Patients can check the registration of a health practitioner using the Ahpra public register at <https://www.ahpra.gov.au/Registration/Registers-of-Practitioners.aspx>.
* Not have any restrictions on their registration (called ‘conditions’) that restrict them from doing anything that will be needed to care for the person receiving liposuction. Patients should be told if any restrictions apply to the health practitioners treating them, and health practitioners must follow the restrictions. Patients can check for restrictions on a health practitioner’s practice using the Ahpra public register at the link above.
* Be trained and certified in resuscitation
* Comply with professional requirements to keep their knowledge and skills up-to-date (continuing professional development), including topics relevant to liposuction-related care.

# Facilities and equipment

A day procedure service where liposuction is done must be an accredited and registered health service registered to provide liposuction. The service must also:

* Have acceptable ways of preventing and managing infections in patients.
* Have appropriate resuscitation equipment available.
* Have treatment rooms that emergency services (e.g. ambulance) can access.
* Have an environment that is safe from safety problems (for example, equipment or ventilation problems).
* Ensure staff have the required training, skills and accreditation/registration to do their roles.
* Where relevant, only use equipment that is approved by the appropriate authority (the Therapeutic Goods Administration).
* Be involved in, and pass, planned and surprise inspections to keep its accreditation.
* Regularly check whether it is meeting standards by monitoring its performance, and comparing its practices and patient outcomes to other health services (audit and peer review).

# The liposuction procedure

When a liposuction procedure is performed:

* A maximum of five litres of fluid (including fat and other fluids) should be removed from the body in one procedure. This maximum amount should be smaller for smaller patients. The maximum amount should also be smaller for some liposuction techniques.
* The procedure needs to be done in a way that meets accepted standards for minimising the risk of infection and is hygienic.
* Doses and concentrations of medications, including anaesthetics, must be within safe limits (and at or below specified maximums), which are described in the full version of this guideline.
* If the procedure involves anaesthesia (including local anaesthetic for a large area), the medical practitioner(s) must monitor the patient’s health carefully during the procedure. This includes their heart rate, breathing, blood oxygen levels and (in most cases) blood pressure.
* If the procedure involves anaesthesia (including local anaesthetic for a large area), the patient should have a cannula (‘drip’) put in (usually in their arm). Fluids should be readily available in case they are needed.
* Only one person should do liposuction on a body part or area at any one time.
* After the procedure, a registered nurse with experience caring for people after surgery must monitor the patient for between one and four hours, depending on how much liposuction was done.
* If fat is being stored for later use, it must be stored, labelled and monitored according to specific guidelines and rules.

# After surgery

When a patient goes home after having liposuction as a day procedure, they need to have somebody with them that night to help them if they become unwell or something goes wrong. The person needs to be able to contact the medical practitioner who did the procedure and/or take the patient to an emergency department if needed. If a patient does not have somebody suitable available, they should not have liposuction done as a day procedure.

The medical practitioner who did the liposuction, or an appropriate person they choose, must be available to be contacted by the patient or their support person for at least 24 hours after surgery, in case the patient becomes unwell, or something goes wrong. On the night of the procedure, the medical practitioner who did the liposuction must be available to assess the patient in person if there is a major problem with the patient’s health. They must also check on the patient between one and three days after the procedure, and one week later. They must have plans in place to send the patient to hospital, and inform the hospital of the situation, if the patient needs hospital care.

If a patient develops signs of infection, they should be checked by a medical practitioner as soon as possible. If they have an infection, they must be given antibiotics to treat it as soon as possible. Some patients with severe infections may also need urgent surgery.

## Combining procedures

Patients who have another procedure at the same time as liposuction are more likely to experience complications.

### Full abdominoplasty

A full abdominoplasty is when abdominal muscle is tightened, the belly button moved, and excess skin and fat is removed from around the abdomen (belly). This procedure should not be done in a day procedure setting, because of the higher risks involved.

### Removal of soft tissue

Sometimes people having liposuction also have other tissues (for example, skin) removed at the same time. If this is being considered, and the amount of fluid (fat and other fluids) being removed from the person by liposuction is more than one litre, no more than 500g of other tissue should be removed at the same time. If more than 500g of tissue needs to be removed, this should be done as a separate procedure to the liposuction.

### Fat transfer

If fat is being moved from one part of a person’s body to another part of their body, no more than one litre of fat should be moved at one time. Generally, storing body fat to use later is not recommended.

### Brazilian Butt Lift

The Brazilian Butt Lift (BBL) procedure involves changing the shape of the buttocks, so it appears more ‘lifted’, by injecting fat from somewhere else in the body. The risks of BBL are higher than for liposuction alone. The risk of death is also higher for BBL than many other cosmetic procedures. Due to the risks involved, patients considering BBL should be reviewed by their GP and/or a psychologist before having the procedure.

# Quality and safety information

Any health service that does liposuction must track key information about the quality and safety of their service, including patient outcomes, and report it to the Victorian Government. This includes any complications that occur in the 30 days after a liposuction procedure. Some examples of information the health service must collect, and report includes:

* Amount of fluid being removed during liposuction procedures.
* Amount of anaesthetic being used during liposuction procedures.
* Allergic reactions or other negative side effects of medications or the procedure.
* Information provided to patients after the procedure.
* Complications that happened after the procedure (for example, infections).
* Patients needing antibiotics after the procedure.
* Patients needing to have more surgery to fix problems after the first procedure.
* Patients needing to go to an emergency department after the procedure.
* Complaints from patients (or those close to them) or colleagues.

# Complaints and open disclosure

Patients and those close to them have the right to make a complaint about their care. They can complain to the health practitioner or health service, or they can complaint to an authority like Ahpra, the Health Complaints Commissioner, or Department of Health.

Health practitioners must not make a patient who complains about their experience suffer negative consequences, or make them think they will experience negative consequences, because of their complaint. Health practitioners and health services involved in liposuction must follow certain laws and standards when receiving and responding to patient complaints. This includes the Victorian Complaint Handling Standards. The standards are available at <https://hcc.vic.gov.au/sites/default/files/2021-04/complaint_handling_standards_04062020_vicgovtgazette_g22.pdf>.

Health practitioners and health services must also be proactive, open and honest in telling patients when something went wrong with their care (open disclosure). This includes telling the patient (and/or their family) what happened, why it happened, and how they will prevent something similar happening to another patient. It also includes apologising for what happened. Patients should not be asked to sign anything that says they will not tell anybody what happened (a non-disclosure agreement), or that they will not complain to regulatory or complaints entities such as Ahpra.

Travelling for liposuction

The information in this guide is about liposuction done in Victoria, Australia. Requirements vary in other states, and in other countries. Sometimes patients choose to travel overseas for cosmetic surgery, including liposuction. If patients are thinking about doing this, they should be aware that standards of things such as health practitioner training, infection control, safety equipment and monitoring after surgery may be lower in some other countries. There have been cases of people from Victoria experiencing serious and life-threatening infection developing in procedures performed overseas. This may happen more often for liposuction done in some countries, compared with liposuction done in Victoria. There may also be a higher chance of these infections not being able to be treated as well by antibiotics (due to antibiotic resistance).