

Facing Surgery?



Today, surgeons worldwide use the *da Vinci* Surgical System on patients diagnosed with many complex conditions such as: cancers of the prostate, cervix, uterus, lung, colon/rectum, as well as heart disease and fibroid tumors. *da Vinci* is minimally invasive and uses the latest in surgical and robotic technologies. *da Vinci* features a magnified 3D HD vision system and special instruments that bend and rotate far greater than the human wrist. These features enable your surgeon to operate with enhanced vision, precision, dexterity and control.

Learn more about minimally invasive *da Vinci* Surgery

Talk to your doctor and visit:

www.daVinciSurgery.com



da Vinci.Surgery

Are You a Candidate for *da Vinci* Surgery?

Only you and your doctor can decide if *da Vinci*® Surgery is right for you. Bringing this form to your appointment may help you to discuss any health concerns with your doctor.

Here are a few questions to ask your doctor:

1. What are the pros and cons of each surgical approach (open surgery, traditional laparoscopy and *da Vinci* Surgery)?
2. I'd like to avoid a large incision. Am I a candidate for minimally invasive surgery?
3. How long will I have to stay in the hospital?
4. How soon can I return to my normal activities?
5. Are you a *da Vinci* surgeon? If so, how many procedures have you performed?

All surgery presents risk, including *da Vinci* Surgery. Results, including cosmetic results, may vary. Serious complications may occur in any surgery, up to and including death. Examples of serious and life-threatening complications, which may require hospitalization, include injury to tissues or organs; bleeding; infection, and internal scarring that can cause long-lasting dysfunction or pain. Temporary pain or nerve injury has been linked to the inverted position often used during abdominal and pelvic surgery. Patients should understand that risks of surgery include potential for human error and potential for equipment failure. Risks specific to minimally invasive surgery may include: a longer operative time; the need to convert the procedure to other surgical techniques; the need for additional or larger incision sites; a longer operation or longer time under anesthesia than your surgeon originally predicts. Converting the procedure to open could mean a longer operative time, long time under anesthesia, and could lead to increased complications. Research suggests that there may be an increased risk of incision-site hernia with single-incision surgery. Patients who bleed easily, have abnormal blood clotting, are pregnant or morbidly obese are typically not candidates for minimally invasive surgery, including *da Vinci* Surgery. Other surgical approaches are available. Patients should review the risks associated with all surgical approaches. They should talk to their doctors about their surgical experience and to decide if *da Vinci* is right for them. For more complete information on surgical risks, safety and indications for use, please refer to <http://www.davincisurgery.com/safety>.