Foot Care Associates of Texas Dr Michael Wynn

23972 A Hwy 59 North Kingwood, TX 77339

SMOKING AND CAFFEINE USE

If you smoke or consume caffeine, you should stop at least one to two weeks prior to your surgical procedure and not resume smoking/caffeine use for at least 3 more weeks after surgery. A recent study has shown that smokers/caffeine users are more likely to experience 12 times more wound healing problems than non-smokers/caffeine users. Nicotine and caffeine constrict the blood vessels, restricting blood flow to the skin and other parts of the body that need it most, those areas that are undergoing the healing process. Therefore, smokers/caffeine users are much more likely to experience skin loss, fat necrosis and scarring after a surgical procedure. Although these complications can affect anyone, ceasing to smoke and the consumption of caffeine during the advised periods will greatly decrease your chances that such complications will affect you. Most severe problems with healing of the skin occur with individuals who smoke and use caffeine. Please advise our office if you ingest nicotine or caffeine in any form on a regular basis. We are here to help you, and will be happy to answer any questions.

WEIGHT MANAGEMENT
Your weight can affect your health and your feet. Please see your PCP for help if needed.
REQUEST FOR EXTRA FORMS TO BE FILLED OUT

We file all insurance claims for the professional services completed by Dr. Wynn at no charge to you. However, many employers and/or insurance companies require that patients have forms filled out by Dr. Wynn's office for various reasons such as short term disability or paid time off ect. for their benefits. Unfortunately due to the time it takes to fill out the forms, we must charge an administrative fee for each set of forms, the fee and time frame depends on the type of forms. We are sorry for any inconvenience, but due to the requests for these services you are responsible for these fees.

Patient Name (please print)		
Parent or Authorized Representative (please print, if applicable)	-	
Signature	Date	