

A BETTER YOU COSMETIC SURGERY CENTER**POSTOPERATIVE INSTRUCTIONS-BREAST REDUCTION**

PRE-OP: You must purchase a bra which does not have any under wire, and must open in the front (usually one or two sizes smaller) and bring it with you the day of surgery.

POST-OP: The first 24 hours are best spent resting. Stay in bed the first day except for taking care of necessary functions. You must have someone with you at all times for the first 24 hours and he/she must also read these instructions carefully. You should have someone assist you when you first start ambulating.

You can expect drainage (usually bloody), swelling, bruising and discoloration of the breasts. One side may be a bit different from the other during the first few days and weeks, both as far as pain and swelling are concerned (but remember they were asymmetric before). The contour may be irregular, but generally it settles with the help of time and gravity.

When general anesthesia is used, the tube placed in the throat may cause the throat to be sore. This is best relieved with cold liquids. The soreness disappears in a few days.

DIET: If you have no nausea, then you can take liquids. If liquids are tolerated, then mild, bland foods may be tried next. Once these are adequately ingested, a normal diet may be resumed.

ACTIVITY: No strenuous activity is allowed for the first week. When lying down be certain not to lie flat, but to elevate your head on two or more pillows. It is very important that you do not use your arms to push off or lift as you get up out of bed—keep arms crossed across your chest. Avoid waterbeds...it is better to use a couch if necessary. Slowly increase your activities throughout the first week. General guidelines are to avoid exercise and overhead motion (do not reach above your shoulders) and to avoid the use of the arms for such things as cleaning and lifting. Specifically **DO NOT DO HOUSEWORK!** No driving at least until the fourth day after surgery or when you are no longer taking pain medication and you are comfortable doing the motions required to drive a car. At that point, you may begin short trips to the store, etc. You may ride in the car earlier than this, but you must not take extended drives (more than about 10 miles) for the entire first week. During the second and third weeks after your surgery, increase your activities slowly. You may take long walks. You may begin performing some light housework, cleaning one room of the house but not the whole house. You will be seen at 2 weeks and at 6 weeks after your surgery. At that time, we will probably release you to all activities including any athletic hobbies, such as running, weight lifting aerobics, racquet sports etc. Remember no lifting over 10 lbs or strenuous activity (no gym) for the first 6 weeks after surgery.

SHOWERING: You may begin showering the second day after your surgery. You may remove the gauze pads if they are present. However, the tape strips (steri-strips) **MUST BE LEFT IN PLACE! DO NOT** let the water hit directly on the breast or tape and simply pat the tape strips dry with a soft towel if they get wet. You can only remove your bra to shower (after you must quickly reapply it).

DRESSINGS: You must wear the bra, which was put on at the time of surgery day and night for the first 6 weeks. After two days, you may remove the bra for bathing yourself or washing the bra; otherwise, it should be worn at all times. **DO NOT REMOVE THE TAPE STRIPS** (steri-strips) present on the breast/chest. The steri-strips will come out by themselves in around 3 weeks time. **DO NOT USE HEATING PADS OR COLD COMPRESSES.**

BRA: After you are healed, you should always wear a bra at all times to maintain the breast reduction. The bra prevents further sagging and counteracts the effects of gravity. When you run or perform sports, you should wear a special bra or a double bra to limit any breast movement.

SUNSHINE/

TANNING: You **may not tan** the breast (collar bone to bottom of rib cage) for 6 weeks after surgery. This includes tanning beds (never recommended). After 6 weeks, you may begin tanning slowly. Continued tanning may cause splotches to become permanent. The skin will be very sensitive for several months, and you may sunburn the skin without knowing it. Use the combination of Zinc and Titanium Oxide as this blocks both UVA and UVB wavelengths at all times when exposed to the sun.

SMOKING: **ABSOLUTELY NO SMOKING** is allowed, and stay away from others who smoke, as significant complications can occur including scar deformity.

CLOTHING: For ease in changing clothes without discomfort, wear clothing that fastens in the front for the first few days and on the day of surgery.

TRAUMA: If you get bumped or hit in the general area of your surgery and you have drainage, call the office at **(361) 881-9999**.

WOUNDS: **Use only normal saline to clean wounds** (definitely do not use hydrogen peroxide, alcohol, Mederma or other products, etc) **and you may apply Aloe Vera.** Healing is a gradual process and most scars will fade over time without medical intervention. If you wish to apply a topical cream, we recommend 100% Aloe Vera gel, 3 or 4 times per day, especially to relieve itching. Should you notice an opening along your wound (this usually occurs around 2-4 weeks after your surgery), do not be alarmed: usually it is not an infectious process but it is caused by choking off of your small vessels because of the stretching and tension placed on your skin and tissues. This results in lack of blood supply (= no oxygen and nutrients) necessary for healing and therefore the wound opens. This occurs more frequently in obese patients. The wound will heal spontaneously in weeks. You can speed up the healing process by using a Q-tip or applying gauze wet in saline solution (= Wet to Dry); it will stick to the wound and when you remove it you will also remove the debris. You should clean the wound in the shower twice daily and then apply the wet to dry gauze. The water from the shower-head acts like a power washer. If the wound is larger than 1 inch, if it is painful and the surrounding area is very red, please call the office so that we can arrange to see you as soon as possible.

SENSITIVITY: Nerves in the area of the breast are frequently irritable after the surgery. This may show up by decreased sensation (numbness) or more frequently with oversensitivity of the breast skin or nipples. Usually this resolves in a few weeks but occasionally it may take months.

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PAIN MEDICATION: Pain medication makes recovery more tolerable and prevents a rise in blood pressure. Take Lortab (Hydrocodone) and Vistaril (Hydroxyzine) by mouth every 4-6 hours as needed for pain. If you are asleep, the family should not wake you to take the pain medication. Most people do not need medication around the clock after 2 days. You are encouraged to take this medication for the first few days but take them only as needed. Be certain to eat something when taking your pain medication (i.e. cookies, crackers, milk, food, etc.) When using prescribed pain medication, **DO NOT** drink alcoholic beverages or operate motor vehicles. Pain medicine refills **CANNOT BE CALLED IN** after hours or on weekends, so anticipate if it looks like you may run out! All pain medicines can be constipating. After you are back on a more normal diet, eat fruits or drink fruit juices. You may take a mild laxative (such as Correctol or Milk of Magnesia) if necessary. If you have a tendency towards constipation, consider taking a laxative the day before your surgery. Absolutely **DO NOT** take Aspirin, Motrin, Advil, etc.

TAMPON USE DURING SURGERY: We advise our patients who are menstruating around the time of their surgery to use sanitary napkins rather than tampons, to avoid Toxic Shock Syndrome. We do **NOT** want you to wear a tampon to surgery, as it may be left in place for an extended period of time. Remember that while you are taking medication you may forget to change your tampons in a timely manner. Therefore, we ask that if you are menstruating, that you use a sanitary napkin.

PROBLEMS: If you have any problems or questions following surgery, please call our office at **(361) 881-9999**. We will be glad to answer any questions over the phone during the daytime from 9:00-5:00, or if the need arises to see you at anytime. When the office is closed, a voice mail system will relay your message and your call will be returned shortly. Please be sure to leave your name and a telephone number where you can be reached (make sure you speak with a loud and clear voice and that you keep your telephone line free).

WATCH CLOSELY FOR POTENTIAL PROBLEMS AND CALL THE OFFICE IMMEDIATELY AT (361) 881-9999 IF ANY OF THE FOLLOWING OCCUR:

1. Marked swelling on one side or the other. This is something that would be **VERY NOTICEABLE** even with the bra in place. This could be a sign of bleeding in the area of your surgery.
2. Signs of infection. This usually takes 3 to 5 days and shows up by becoming more painful instead of less painful: red; swollen; purulent drainage form the wound; red streaks; fever of 101 degrees or more.
3. **Proceed to the nearest Hospital Emergency room and call Dr. Gentile if any of these symptoms occur, which may be indicative of Pulmonary Embolism:**
(1) difficulty breathing, shortness of breath and/or fast breathing, (2) light-headedness, fainting, (3) fast pulse rate, (4) redness and/or swelling of your lower legs and/or ankles, (5) pain in the calf area of one or both of your lower legs not caused by trauma.
4. Any other symptoms which you feel are abnormal.

I HAVE READ, UNDERSTOOD AND AGREE TO FOLLOW THE 3 PAGE POSTOPERATIVE INSTRUCTIONS SHEETS, WHICH I HAVE RECEIVED.

PATIENT SIGNATURE DATE Witness Date

BREAST REDUCTION COMPLICATIONS CONSENT

I certify that I have read and understand the foregoing consent and the additional and distinct Patient Agreement and Informed-Consent forms (signed by me separately). They have been explained to me. I fully understand the proceedings and consent for this procedure. The possible complications and unfavorable results have been made clear to me, including but not limited to the following:

- A. Infection, postoperative bleeding or hematoma, requiring additional surgery or incisions. Blood loss can be so extensive as to require replacements with blood or blood substitutes and may necessitate hospitalization.
B. I am aware that the practice of medicine is not an exact science and I acknowledge that no guarantees have been made to me as to the result of the operation or procedures.
C. Bruising and discoloration which may last for several weeks.
D. Worsening the Asymmetry. There is no guarantee that the breasts will be symmetrical postoperatively.
E. Necrosis of the skin, and nipple/areola. I understand that even smoking one cigarette in the period before surgery can enhance this risk.
F. Postoperative pain and discomfort usually controlled by analgesics, but may be prolonged and extensive and chronic.
G. Loss of nipple and areola requiring secondary reconstruction surgery.
H. Discoloration, hypertrophic scar formation or keloid.
I. Possible changes in sensation in the skin of the breasts.
J. Need of additional surgery.
K. I have stopped smoking completely for 6 weeks prior to surgery and agree to continue stop smoking for the next 6 weeks (including avoiding 2nd hand smoke).
L. I agree to keep Dr. Gentile informed to any change of address so that he can notify me of any late findings and I agree to cooperate with Dr. Gentile in my care after surgery until completely discharged.

I am not allergic to anything accept

I have initialed the complications sheet and signed the Patient Agreement and Operative Informed-Consent forms. I have read these and fully understand them. Furthermore, I state that I have complied with the written preoperative instructions.

PATIENT SIGNATURE _____ **DATE** _____ **TIME** _____

WITNESS SIGNATURE _____ **DATE** _____ **TIME** _____