A BETTER YOU COSMETIC SURGERY CENTER

POSTOPERATIVE INSTRUCTIONS-RHINOPLASTY

POST-OP: The first 24 hours are best spent resting. 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 start ambulating (moving around).

You can expect drainage (usually bloody), swelling, bruising and discoloration of your face. Every effort is made during surgery to minimize nasal swelling and bruising but don't be alarmed if your nose seems more (or less) swollen than others undergoing the same proceduredifferent nasal problems require different surgical approaches to achieve ideal corrections. Keeping your head elevated will help decrease swelling. Maximum swelling will occur at the second day postoperatively. It is not unusual for one eyelid to be more swollen than the other. You can apply cold compresses (or even better HEB Pea bags placed in the freezer) on top of a towel especially during the first 24 hours.

If 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.

NOSE: Specific instructions related to the nose:

- 1. Avoid constant rubbing of your nostrils and base of your nose with Kleenex it may lead to bleeding, swelling and infection with slow healing.
- 2. Men may shave but if the upper lip is swollen wait for 5 days after surgery.
- 3. Eyeglasses may rest on the nasal splint (provided they are lightweight) but better yet suspend them with tape from the forehead for 3-4 weeks. Contact lenses can be worn 2-3 days after surgery.
- 4. Temporary nasal blocking can be expected secondary to surgery changes and crusting may develop later. You can help it by placing a few saline drops in each nostril.
- 5. Keep a stiff upper lip. Excessive motion of your lip can disturb healing. Avoid excessive talking and smiling, brush your teeth gently with a small soft brush, and avoid chewing gum and food requiring excessive chewing.
- 6. Do not stick a Q-tip inside your nose.
- 7. Gentle cleansing of dried blood or soiled areas around the upper lip or nostrils can be accomplished with peroxide and a Q-tip.
- 8. After the splint is removed, **AVOID AND DO NOT SCRATCH YOUR NOSE OVER THE DORSUM for 1 year** as this rubbing creates inflammation resulting in a new hump (usually a little nodule). It is helpful to gently apply a mild moisturizer or lotion over the dorsum of the nose to prevent this itching.
- 9. No blowing of your nose, coughing or sneezing, as this causes increased pressure and therefore bleeding. If you must: you need to keep your mouth open.
- **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 soft diet may be resumed for one week prior to progressing to your normal diet. Avoid chewing gum or foods that require excessive chewing.

ACTIVITY: No strenuous activity is allowed for the first two weeks. Take it easy and pamper yourself. Try to avoid straining. When lying down be certain not to lie flat, but to elevate your head on two

or more pillows. It is very important to keep your head elevated at all times since it decreases your swelling. It is better to use a reclining chair if necessary. Avoid waterbeds. Stay in air conditioned areas as it decreases swelling. Heat is to be avoided. General guidelines are to avoid exercise, bending, flexing or lifting. Specifically DO NOT DO HOUSEWORK! AVOID HITTING OR BUMPING YOUR NEW NOSE. Specifically avoid playing or picking up children or pets and embracing family or friends. Avoid swimming, gym or other strenuous activities for 6 weeks; no diving or skiing for 2 months. Take every precaution to avoid hitting your nose. No driving at least until the sixth day after surgery, 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 first week or better yet, stay at home except for follow-up visits with Dr. Gentile. You may increase your activities slowly during the second and third weeks after your surgery. 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 1 week and at 6 weeks after your surgery. At that time, we will probably let you know when we can release you to all activities including any athletic hobbies, such as running, weight lifting aerobics, racquet sports, etc.

- **SHOWERING:** You may begin showering one day after your surgery, except for the face. Use lukewarm water. You may shower your face after the bandages are removed by Dr. Gentile usually one week after surgery.
- **DRESSINGS:** The splint, which was put on at the time of surgery, will be removed by Dr. Gentile in 6-7 days postoperatively. Drainage from the nose is normal and usually stops on the third or fourth day postoperative. If drainage is excessive use a small mustache dressing (2 X 2 gauze rolled under your nose). DO NOT USE HEATING PADS but you use cold packs or HEB Pea bags for the first 24 hours after surgery.

SUNSHINE/

- **TANNING:** It's absolutely important that you remain indoors in an air-conditioned environment for the first week to help decrease swelling. You <u>may not tan</u> for 12 weeks after surgery. This includes tanning beds (never recommended). After 12 weeks, you may begin tanning slowly; however sun exposure and tanning can cause your face to swell up. 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 the 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! Smoking significantly increases the development of complications resulting in lengthy and problematic recoveries.
- **CLOTHING:** For ease in changing clothes without discomfort, wear clothing that does not require going over your head. Wear loose jogging type clothing on the day of surgery.

- **SENSITIVITY:** Nerves in the area of the face are frequently irritable after the surgery. This may show up by decreased sensation (numbness) or oversensitivity of the skin. Numbness of the tip of your nose usually resolves within weeks to 3 months.
- **PAIN MEDICATION:** Although most patients experience little or no pain, pain medication makes recovery more tolerable and prevents a rise in blood pressure. Take Hydrocodone (Lortab) and

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Hydroxyzine (Vistaril) 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 WILL NOT 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 <u>NOT</u> want you to wear a tampon to surgery, as it may be left in place for an extended period of time. Remember that if 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.
- **REMEMBER:** When the splint and bandages are removed the nose will often appear swollen with the tip turned up a lot this will subside and you will be presentable in 10-14 days. Your nose will assume its final appearance in 8 months (**do not scratch or traumatize it, as this can cause the hump to reform**). Any discoloration will usually disappear in 10-14 days. Your "stiff upper lip" will soften and disappear within a few weeks and any numbness of the tip will also disappear in time. If you have thick and oily skin, do expect a longer swelling period.
- 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 bleeding on one side or the other. This is something that would be VERY NOTICEABLE and your drainage would be bright red (also from the mouth). If bleeding occurs: lie in bed with the head elevated on 2-3 pillows, apply ice compresses on the forehead /eyes, and call the office.

Patient Initials

- 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 from the wound; red streaks; fever of 101 degrees or more.
- 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-headiness, 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 such as an injury to your nose.

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MAKEUP TIPS FOR A NATURAL APPEARANCE

- Always select a foundation that is one shade lighter than your natural skin tone.
- Use a translucent powder after foundation for complete coverage with a soft, natural look.
- A concealer (stick or cream) may be applied under the eyes to mask bruises or dark circles. Apply it under your foundation, and use a shade slightly lighter than your base color.
- Use a green skin toner to balance excessive redness, pink to counteract a shallow complexion, and purple to mask yellow discoloration.
- Avoid brown or black eyeliner after eyelid surgery, as these colors tend to emphasize redness. Blue eyeliner, smudged along the lash line on both the upper and lower lids, helps to minimize redness and dark circles.
 - Scars in the eyebrow area may leave brow hairs missing. Use a small, angled brush to shade the missing area, using a flat shadow color close to your hair color. This looks more natural than shading with eyebrow pencil.
- A soft eye shadow pencil in slate or taupe can be smudged toward the outer corner of the eye to correct any visible scars in this area.
- Avoid using metallic or iridescent eye shadow or face makeup, as these colors emphasize open pores, scars, and other skin flaws.
- After a facelift, choose a soft, face framing hairdo. Hair that is too short around the face, and hair that is swept up off the forehead may reveal scars. Medium-length bangs, perhaps gently curled, can help to camouflage scars in the forehead area.
- If hairline and forehead scars area not a problem, a soft, full backswept hairstyle can promote a youthful appearance. Avoid severely pulled-back hairstyles.

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Patient Initials

If you have a reddened complexion or redness around the eyes, never wear fuchsia, rose, red, or hot pink. Instead, choose soft shades of blue and green for the wardrobe and makeup.

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I HAVE READ, UNDERSTOOD AND AGREE TO FOLLOW THE 4 PAGE POSTOPERATIVE INSTRUCTION SHEETS, WHICH I HAVE RECEIVED.

PATIENT SIGNATURE

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DATE

Witness

Date

CONSENT FOR RHINOPLASTY SURGERY COMPLICATIONS

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:

		Patient Initials	Date
А.	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.		
р -	I am amount that the monotice of modicine is not an analt signal		
В.	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.		
С. –	The goal of the operation should be improvement of appearance		
с.	and function, not total perfection. If you are seeking absolute		
	perfection, you should not undergo this operation.		
	per rection, you should not under go this operations		
D. –	Bruising and discoloration that can last for several weeks.		
Е.	All wounds heal by scar formation, a process over which the		
	surgeon has little control following the operation. This explains		
	some of the changes which occur as healing progresses. Scratching		
	the dorsum of the nose will create a new hump.		
F. –	Widening, thickening or hypertrophic scarring.		
r.	widening, thekening of hypertrophic scarring.		
G.	Postoperative pain and discomfort usually controlled by analgesics,		
	but may be prolonged and extensive and chronic.		
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Н.	Asymmetry. There is not a guarantee that the nose will be		
	symmetrical postoperatively (it is not before).		
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Patient Initials

I.	Nasal airway obstruction can occur following rhinop may or may not be correctable with additional surger need permanent medications.			
J.	Swelling which usually occurs over a maximum of 2- gradually disappears over a period of weeks.	4-48 hours and	l	
К.	Temporary or permanent loss of sensation of the nos	se.		_
L.	Necrosis of the skin (more common with open rhino) understand that even smoking one cigarette in the per or after surgery can increase the risk.			
М.	Possible changes in the skin of the face and nose.			
N.	Need of additional surgery.			
0.	I have stopped smoking completely for 6 weeks prior agree to continue stop smoking for the next 6 weeks (in avoiding 2 nd hand smoke.)		d	
P.	I agree to keep Dr. Gentile informed to any change of he can notify me of any late findings and I agree to co Dr. Gentile in my care after surgery until completely of	nat		
I am	not allergic to anything accept			
forn	ve initialed the complications sheet and signed the Pans. I have read these and fully understand them. Futen preoperative instructions.			
PATIENT SIGNATURE DATE		TIME		
WITNESS SIGNATURE DATE		TIME		