

## PRE-OPERATIVE INSTRUCTIONS FOR RHINOPLASTY

### **DAY BEFORE SURGERY:**

• **Arrival time:** The Surgery Center will call the day before surgery with the arrival time. If you don't receive a call or for further questions, call the appropriate number below:

Davis Hospital: (801)-807-7440
 Lakeview Hospital: (801)-299-2160
 Lone peak Hospital: (801)-545-8000

Utah Facial Plastics Surgical Center in Draper: (801)-776-2220

# **STARTING 2 WEEKS BEFORE SURGERY (Extremely Important!)**

- Medications to Avoid: Take only those medications approved or prescribed by your surgeon.
   Avoid medications containing NSAIDS like aspirin or ibuprofen (Advil, Motrin, Naproxen, others) for two weeks before and after surgery. These medications will increase bleeding.
- Substances to Avoid: Avoid all alcohol and nicotine products. Nicotine interferes with healthy circulation and causes delayed healing.

## **NIGHT BEFORE SURGERY**

- DO NOT EAT OR DRINK ANYTHING AFTER MIDNIGHT OR SURGERY WILL BE CANCELLED. Hydrate well before midnight. If prescription medications, take a small sip of water.
- Set Up Home Recovery Area. This may include pillows, blankets, books, television, food and drinks, ice packs and anything else to assist with a comfortable recovery.

#### **DAY OF SURGERY**

- *Dress Comfortably*: Dress in comfortable, clean, and loose-fitting clothes. Shirts that can be buttoned or zipped-up are preferred to avoid snagging the nose.
- *Arrival to Facility*: Have someone drive you to and from your designated surgery location. You cannot be released to UBER or a taxi alone. You must have an adult over 18 with you.
- Do NOT wear any lotion, sunscreen, mascara, makeup, gel nail polish or press-on nails, jewelry (remove all piercings), cosmetic creams.

# POST-OPERATIVE INSTRUCTIONS FOR RHINOPLASTY & REVISION RHINOPLASTY

## **DAYS 1-7 AFTER SURGERY**

- Gentle Movement is Important: Make sure to get out of bed and slowly walk around the room with some assistance to avoid lower leg blood clots. When in bed or on the couch, make sure to move your legs and ankles periodically. Take occasional deep breaths for the first 24 hours to keep your lungs clear.
- *Cold Compress:* Use cold compress on your eyes, cheeks, and forehead (not nose), without getting your nose cast wet. Twenty minutes on and 20 minutes off. The first 3 days are the most crucial for icing.
- Sleep: Sleep on your back with your upper body elevated about 45-60 degrees. Try using 4-5 pillows, an airplane neck pillow & a wedge pillow) or recliner. Do not sleep on your side.
   DO NOT SLEEP FLAT. Keeping your body more upright will minimize swelling. Do this for at least 1-2 weeks or even longer. Lying flat will increase swelling and scar tissue.
- Drip Pad: You will have some bloody drainage after surgery. You will have a gauze drip pad
  placed beneath your nose. Change this as needed for the first 72 hours following rhinoplasty
  surgery. It is common to change this every 15 minute for the first several hours following
  rhinoplasty. If you completely saturate the pad with bright red blood every five minutes,
  please call our office.
- *Medications*: Review Medications instructions and take them appropriately. Antibiotics start the night of surgery, but steroids start the following day.
- Cleaning of the Nose: Incisions should be cleaned twice a day. Gently clean the sutures with a Q-tip or gauze dipped in 50% hydrogen peroxide and 50% saline water. Allow the area to dry and follow with antibiotic ointment (bacitracin/polysporin) twice a day.
- Saline Spray: Start using Saline spray the following morning. 1-2 sprays each side, every hour while awake. Continue nasal saline for 1 month following your surgery.
- Cast: The cast must remain on your nose for 5-7 days after your procedure. Keep the cast dry by carefully washing around your face with a mild washcloth or soap. Do not take a hot/steamy shower as this can cause the cast to fall off prematurely.

## NIGHT BEFORE YOUR CAST REMOVAL (1 WEEK POST-OP APPOINTMENT)

• Shower: Get your face and nose cast soaking wet for 20 minutes under the shower with lukewarm water (NOT HOT WATER) the night before and the day of your cast removal (2 showers) so that we can remove your cast easily and painlessly. If you have dry skin take a third shower. Let the water hit the top of your head and forehead and drip over your nose. Don't let shower spray directly hit your nose.

# AFTER CAST REMOVAL (FOR THE NEXT 30+ DAYS)

- Sleep: Continue to sleep elevated on at least 3 pillows or more.
- Exercise: Slowly resume your activities beginning the second week. You may begin by walking or similar light exercise. Strenuous exercise may be resumed in 4-5 weeks. Build up to this lever slowly. Contact and semi-contact sports need to be avoided for 3 months. Full swimming is allowed after 6 weeks.
- Sun & Heat: Your skin should be protected from sun exposure for at least six months after surgery. A sunburn will cause the nose to swell dramatically and delay the result. Sun avoidance or protection with a hat is preferred. You may begin wearing a zinc-based sun block once the cast is removed.
- *Flying:* Avoid unnecessary flights (vacation, etc.) for 3 months. We recommend "taping" of your nose when you fly back home if you are an out-of-town patient.

# **MEDICATIONS**

- Pain: You will be prescribed a pain medication for post-operative pain control. Good pain
  control reduces bleeding after surgery. If your discomfort after surgery is not strong you are
  welcome to take Tylenol in place of the prescribed medication. Do not take Tylenol with the
  pain medication, as most often the medication you are prescribed will have Tylenol in it. Do
  not exceed 4,000 mg of Acetaminophen in any 24- hour time period. Take medication with
  food to minimize the risk of nausea. Keep in mind some discomfort and pressure or
  throbbing is to be expected.
- *Antibiotics*: Antibiotics should be started the night of your surgery after you get home. Continue until finished.
- Steroids: "Medrol Dose Pack" to be started the DAY AFTER your surgery. Follow the instructions on the medication box until finished.
- Constipation: You may experience constipation if taking narcotic pain relievers. MiraLAX or
  other over-the-counter laxatives are recommended. Do not wait to take it until you are
  constipated. Begin taking laxatives with the first narcotic pain pill.

## **NUTRITION:**

• *Diet:* Eat as tolerated and take small bites. Soft foods are easier to swallow since you will not be able to breathe through your nose and chewing may be uncomfortable. Dark green leafy vegetables and pineapple juice can help reduce bruising and swelling. Eat lots of pineapples.

#### **ACTIVITY:**

- Physical Activity: Refrain from any physically exerting activity. No bending over, straining, or lifting more than 10 lbs for the first week after surgery. DO NOT RAISE YOUR BLOOD PRESSURE OR HEART RATE. Being too active increases bleeding, swelling and scar tissue.
- Return to Work: Most patients return to work after their cast is removed at their one-week
  appointment. This, however, depends on their job responsibilities and amount of face-toface interaction and bruising.
- *Driving:* Do NOT operate a vehicle or make important decisions until you have been off narcotic pain medications for 24 hours or more. Use good judgment.
- Sneezing: If you have to sneeze, do so with your mouth open to reduce pressure.
- *Blowing Your Nose:* No nose blowing and no nose wiping for a month. This may give you a nosebleed or dislodge grafts.
- Hot Tubs/Baths/Swimming Pools: No tub baths or Jacuzzi for 1-2 weeks which may cause swelling, bleeding, and fainting. Do not submerge your head under public pool, lake, or ocean water for 6 months till internal incisions have healed and sealed.

## WHAT TO EXPECT WITH HEALING AFTER RHINOPLASTY:

- Swelling: Swelling is to be expected for many months following a rhinoplasty. Your nose is swollen. Your cheeks, lips, forehead and between the eyes are all swollen. It is all to be expected. Your face may look "odd" to you. This is normal. You may even experience shock, panic or crying. These are normal reactions in a minority of patients. The more you ice the cheeks, eyes, and forehead the first 2-3 days, the easier and faster your recovery will be moving forward.
- Tip Position: Your tip will drop down over the next month and slightly beyond. Do not worry.
  What you initially see with cast removal is not the final results. It is impossible to know
  exactly where your tip will end up, but it will not remain as upturned as right after cast
  removal.
- Asymmetries: Nothing on the human face or body is perfectly symmetric from left to right side. There will be swelling 100% of the time and minor asymmetries inside and outside the nose 100% of the time. These are normal. New slight irregularities may result along where bone and cartilage edges are healing. These are normal. Most of these subtle irregularities or asymmetries are to be left alone. A very minor "touch-up" revision may be required to smooth things out in about 5-10% of cases after a year. Sometimes repeat temporary fillers can improve things avoiding another surgery. We monitor your healing. But do not expect "perfect." Some irregularities or asymmetries cannot be improved even with repeat surgery. Do not lose sight of the big improvements.
- *Bruising:* It is normal to have bruising around the eyes. Most bruises disappear after about 3-4 weeks. The bruises will go from a purple/blue color to a yellow/green shade as it starts to resolve.

- Stiffness: Your nose and smile may be stiffer with initial swelling. This should improve over the next few weeks to months. But your nose will not be as soft or squishy as the original. It has a better structure.
- *Breathing:* Internal nose swelling from the surgery can restrict airflow through the nose. One side of the nose may be easier to breathe through than the other. While some patients may get improved nasal airflow after a few weeks, some take longer.
- Tip Numbness: It is normal for the tip of the nose to be numb. This is temporary and will improve with time.
- DO NOT wear sunglasses or goggles for at least a month.

# **EMERGENCY SITUATIONS** – WHEN TO CALL THE OFFICE OR GO TO THE HOSPITAL

- Signs of Infection: Spreading redness, worsening swelling, increased drainage or drainage of pus, worsening pain, warmth at incision site and temperature over temperature over 101°F.
- Excessive Bleeding: If the dressings are saturated with bright red blood and you are having to make very frequent dressing changes.
- Other Emergency Situations: Shortness of breath or difficulty breathing, chest pain, lightheadedness that does not quickly resolve, severe vomiting, pain, or asymmetric swelling in your legs.

# **Utah Facial Plastics – (801) 776-2220**

Our office number connects to our 24-hour answering service after hours.

APPOINTMENT TYPE	DATE / TIME	LOCATION	STAFF/PROVIDER			
Surgery: Time TBD Day before						
Packing removal						
Suture Removal						
Cast Removal						
2 Week Follow-up						
1-month Follow-up						
3-month Follow-up						
6-month Follow-up						
12-month Follow-up						