

PRE-OPERATIVE INSTRUCTIONS FOR FACELIFT/BLEPHAROPLASTY/FAT GRAFTING

3-4 WEEKS BEFORE SURGERY:

- Obtain Medical Evaluation. If instructed by UFP make a visit to your primary care doctor to complete your medical evaluation. This should be completed at least 2 weeks before surgery. All results can be faxed to 801-615-2258.
- *Smoking*. Tobacco, cigarettes, and nicotine consumption will cause poor wound healing, longer healing times, and excessive scarring. You must discontinue these products more than 4 weeks prior to surgery. Otherwise, the surgery will be cancelled.
- *Hair Care*. If planning to have your haircut or colored, please do so at least 1 week before and/or 4 weeks after surgery.

2 WEEKS BEFORE SURGERY:

- DIET/SUPPLEMENT RESTRICTIONS: Avoid foods, drinks and herbal supplements that can increase risk of bleeding and bruising. Avoid aspirin, Ibuprofen, Naproxen, Motrin, blood thinners, vitamin E, omega-3, fish oil, and alcohol. Use Tylenol in place of other over-the counter pain medications. Stop all alcohol use.
- *Vitamin C.* Begin taking 1000 3000mg per day as tolerated 2 weeks. Vitamin C aids in wound healing.
- *Retinol*. Stop using retinol in your skincare routine. You may begin using retinol once you are healed around 4 weeks after surgery.
- *Post surgery*. If your destination after surgery is more than 60 minutes from the office, you must make arrangements to stay locally.

1 WEEK BEFORE SURGERY:

- Review Instructions with Caregiver. Confirm who will be driving you to and from surgery and stay with you for at least 24 hours after surgery. Caregivers must be over 18 years of age.
- *Alcohol*. Do not drink alcohol 1 week before and after surgery. Alcohol consumption may raise the blood pressure and initiate bleeding.
- False eyelashes. Have any false lashes removed, including extensions or strip lashes. Fake lashes tend to grip tightly to the adhesive put over your eyes during your surgery.
- *Meal prep*. Stock your kitchen with soups, crackers, smoothies, and any soft foods. Eating food that requires much chewing may be difficult after a facial procedure.

NIGHT BEFORE SURGERY:

- DO **NOT EAT OR DRINK ANYTHING AFTER MIDNIGHT OR SURGERY WILL BE CANCELLED**. This includes gum, water, black coffee, and candy. If prescribed daily medications, the surgery center staff will discuss which medications to take the morning of your surgery with a small sip of water.
- *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:
 - o Lakeview Hospital: (801)-299-2160
 - Utah Facial Plastics Draper location: (801)-776-2220
- Shower. The night or morning of surgery, take a shower and wash your hair. This will help reduce the risk of infection by eliminating bacteria. Arrive on the day of the procedure with a clean face. Do not apply any makeup, moisturizers, hair sprays or gels, or nail polish.
- Set Up Home Recovery Area. This may include pillows, blankets, books, television, and anything else to assist with a comfortable recovery.

DAY OF SURGERY:

- Arrival to Facility. Please arrive on time at your designated surgical location. Remember to bring a photo ID.
- *Dress Comfortably*. Dress in comfortable, clean, and loose-fitting clothes. Shirts that can be buttoned or zipped up are preferred.
- *Do NOT wear* any makeup, jewelry, cosmetic creams, hair products, nail polish, sunscreen, remove all piercings and jewelry.
- *Contact lenses*. Do not wear contact lenses. Remember to bring your glasses to sign the necessary paperwork.

POST-OPERATIVE INSTRUCTIONS FOR FACELIFT/BLEPHAROPLASTY/FAT GRAFTING

24 HOURS POST SURGERY:

- Facial Dressing. A dressing is placed around the head and neck to provide moderate compression. Keep this dressing dry. Your surgeon or a staff member will remove the dressing at your post-op day 1 appointment. Attached to your head dressing are two small drains that collect excess fluids and help prevent infection. Drains will be removed at your post-op day 3 appointment.
- Post-Operative Day 1 Appointment. You must have a responsible adult drive you to your first
 office visit post-surgery. At this visit your surgeon or a staff member will remove your
 dressing and provide you with an elastic (ACE) wrap. It is important to wear the ace wrap as
 directed by a staff member and do NOT wear it tightly. Too much compression can cause
 skin breakdown in the neck or cheeks. The dressing is intended to be used as support, notas
 a compression wrap.
- Head Elevation. Sleep on your back with your head elevated about 30-40 degrees (2-3 pillows). Do not sleep on your side. Placing a pillow under your knees may help you from turning in your sleep. Head elevation helps to minimize swelling. Continue this for 2-3 weeks depending on swelling.

- *Physical Activity*. You may be up and moving around the house on the day of surgery and thereafter. However, avoid all strenuous activity. Getting up and moving around helps prevent blood clots from developing.
- Facial Movement. Keep facial/jaw movement to a minimum. Chewing, talking, and laughing should be minimized. Avoid turning your head and if you must turn, move the shoulders and head as one unit.
- *Breathing*. Take deep breaths often when you get home and for the first 24 hours after surgery. This helps to expand the base of your lungs.

MEDICATIONS:

- Pain Medication. You will be prescribed pain medication for post-operative pain control. If
 your discomfort after surgery is not strong you are welcome to take Extra-strength 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 3,000 mg of
 Tylenol in a 24-hour period. Take medication with food to minimize the risk of nausea.
- Constipation. Pain medications may lead to constipation. Any over the counter stool softener
 such as Metamucil or Colace can be used. Start laxatives with the narcotic pain medications
 to prevent constipation from occurring.
- *Nausea*. Some pain medication may make you feel nausea. It is best to eat something small 20 minutes before taking pain medication. Keep hydrated with small sips of non-caffeinated beverages (ginger ale, Sprite, Gatorade).
- Medication to Avoid. Avoid medications containing aspirin or ibuprofen (Advil, Motrin, Naproxen, etc.) for two weeks before and after surgery. These medications may increase bleeding.
- Substances to Avoid. Avoid alcohol, nicotine, and caffeine, for these will dramatically slow the healing process.

NUTRITION:

• *Diet.* A light low-sodium diet is best after surgery. Soft foods will be best to decrease excessive chewing that would lead to more swelling and discomfort. You may start a regular diet after your surgery if you are not feeling nauseated or vomiting.

ACTIVITY:

- Movement is Important. Make sure you are up and walking around immediately after your surgery. When lying down in bed or on the couch, make sure you are moving your legs and ankles. Movement helps prevent blood clots and promotes healthy blood circulation. Avoid bending at the waist, lifting, or straining in your face. If you have small children, bend at the knees, or sit on the floor and let them climb onto your lap. Overexertion may lead to bleeding and prolonged swelling.
- *Physical Activity*. Avoid bending, lifting, straining and aerobic activities for 3 weeks or until you've been cleared by your surgeon. Avoid hitting or bumping your face and neck.
- Exercise. Exercise may not be resumed for 3-4 weeks post-op or as further instructed by your surgeon. When cleared, you must start easily and build back up to your previous exercise levels. Resuming exercise may worsen swelling. Strenuous exercise can be resumed after 6 weeks.

- *Driving*. Do NOT operate a vehicle or make important decisions until you have been off pain medications for 24 hours. Use good judgment.
- *Return to work*. Returning to work depends on the amount of physical activity and public contact your job involves and the amount of swelling and discoloration you develop; on average patients return to work or go out socially 2 3 weeks after surgery. There is some individual variation regarding the time one returns to work.
- *Travel*. Airline travel is restricted until 1-week post-op. You will notice increased swelling with airline travel, and this can happen 6-8 weeks out from surgery.
- *Smoking*. Smoking should be strictly avoided as it interferes with the blood supply to the tissues and slows and hinders the healing process.
- *Massaging*. Avoid any type of Facial massaging until instructed by your Surgeon.

BATHING:

- *Shampoo*. You may shower and gently wash your hair 24 hours after your drains are removed on post-op day 3, avoiding the incision areas. Use the Baby Shampoo provided.
- Hair Care. You may gently comb your hair with a large-toothed comb. Avoid aggressively tugging at hair knots or tangles. You may use a hair dryer to dry your hair only if it is set on the cool setting. No hair products (gel, mouse, hairspray, leave in conditioners, etc.) may be used for at least a week.
- Face Care. Cleanse your face gently with a mild soap twice daily after the first week, using a
 gentle upward motion. Do not use any harsh chemicals or crèmes on your face until all
 incisions have healed and your surgeons have advised you can return to your normalskincare
 regiment.
- Hot Tubs/Swimming Pools. No hot tubs or swimming in pools until your incisions have healed, and approved by your surgeon, which is usually around 6 weeks.

HOW TO TAKE CARE OF YOUR INCISIONS:

- Cleaning your Facelift incisions. Soak a Q-tip with a diluted solution of 50% hydrogen
 peroxide and water. Gently apply the Q-tip over your suture lines 2 times daily. Then use a
 clean Q-top or gauze to gently pat dry the incision line. Finally, apply a generous amount of
 antibacterial ointment with a Q-tip to keep your incision sites moist. Keeping your sutures
 lubricated with ointment is less painful to remove and allows the incision lines to heal with
 minimal scarring.
- Cleaning Your Blepharoplasty Incisions. Soak a Q-tip with saline water. Gently apply the Q-tip over your incision lines 2 times daily followed by applying a generous amount of the prescription antibacterial ointment (Erythromycin).
- Cold compress for your eyes. Following surgery, cold compresses may be used over eyes to
 minimize swelling and control bruising. Ice packs MUST be lightweight. Ice 20 minutes on,
 20 minutes off morning and night. Do not over ice as this can lead to skin breakdown and
 never apply ice directly to the skin. If you are having a fat transfer, you can NOT ice.
- *Donor Site Dressing.* A dressing is placed around the donor area. Keep this dressing dry and remove after 2 days. The sutures are absorbable in these areas and will need a light coat of antibiotic ointment to breakdown. No further wound care is necessary.
- **NO** Cold Compress. Following surgery, cold compresses may <u>NOT</u> be used. Cold temperatures tend to decrease the chance of survival of the fat that was grafted.

- Makeup. Do not use make-up on your eyes for the first 12 days after surgery. After 12 days, you may apply makeup along your incisions to camouflage any bruising or redness.
- Crusting. Occasionally crusting will occur around the sutures. Do not try to remove this
 yourself. This is normal and will resolve. Cleaning your incisions daily will minimize
 crusting.
- ACE wrap. Always keep the elastic ACE wrap in place after cleaning sutures and incision lines for the first 5 days after surgery. Days 5 – 12 after surgery the ACE wrap should be worn any time you sleep (naps and at night).
- Sun Exposure. Avoid sun exposure as much as possible. This will optimize scar healing and
 minimize swelling. During the first year after surgery, it is crucial to use an SPF of 30+ with
 Zinc Oxide, cover your incisions with your hair or a sun hat when outdoors. Even mild
 sunburn can cause permanent discoloration, worsen swelling, and irritate an incision that is
 healing.

WHAT TO EXPECT:

- Swelling and Discoloration. Swelling and bruising of the surrounding tissues can be
 expected. Swelling and bruising may worsen on the second and third day after surgery. It's
 not unusual for one side of the face to be more swollen than the other. Expect some degree
 of asymmetry of the tissues as they heal. This is temporary and will improve over the course
 of the next six weeks.
- Bleeding. Some mild bleeding is not unusual at the incision sites the first few days after surgery. If you try to do strenuous activity, sneezing, heavy lifting or bending forward, aggravated bleeding and swelling may occur.
- Tightness. Your neck and jaw will feel tight immediately after surgery. You may move your head and neck freely. Do not intentionally try to stretch your neck and jaw for the first 3 weeks after surgery. It will slowly loosen overtime.
- Numbness. It is common to have numbness of the cheeks, ears, and under the chin area that may last 3-6 months. Tingling and other odd sensations around incision lines are all to be expected and normal.
- Lumpiness. You may feel some lumpiness in your cheeks and neck. This is normal. It is expected to resolve within 3 6 weeks.
- Pain *and Itching*. Occasional sharp shooting pains or itching is normal and will resolve in a few weeks. Pain is subjective, but most patients describe a mild to moderate pain level after a facelift. Pain is worse at night and can be aggravated with stress.
- Weak or Dizzy. You may experience some weakness or dizziness. This may be more evident
 if you try to stand up too quickly. Take a minute to go from lying down to standing. The
 sensation of feeling lightheaded will get better in a few days. Make sure to drink plenty of
 fluids.
- Depression. You may experience a period of mild depression after cosmetic surgery. This is related to the shock of seeing your face swollen and discolored. Remember this is temporary and once the healing process is completed you will begin to enjoy the results of your surgery. Try not to compare your recovery with others everyone heals in their own way.
- Scars. After all stitches have been removed, the scars will appear a deep pink color. With time, the pink will fade and become white, the firmness of the scar will soften, and they will become less noticeable. Everyone varies with respect to healing, but it takes approximately a

- year for these changes to occur and the scars to look their best. After your incisions are healed, you may apply a Silicone based scar gel to your scar for enhanced healing.
- *Final Result*. Expect to see your final results between 6-12 months as the healing process takes time.

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, and warmth at incision site. Temperature over 101 degrees Fahrenheit.
- *Medication Reactions*. If you develop hives, rashes or itching you may be having a medication allergic reaction.
- 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	PROVIDER/STAFF
Surgery:			
Time TBD day before			
Post-op Day 1:			
Dressing change			
Post-op Day 3:			
Drain removal			
Post-op Day 5:			
Suture removal			
Post-op Day 7:			
Suture removal			
Post-op Day 10:			
Suture removal			
Follow Up:	_		
3 – 4 weeks after			