BeautyFix
Plastic Surgery

Pre/Post Op Guidelines

In an effort to best prepare you for your upcoming procedure, we've created a list of general pre-operative guidelines for you. Please note that pending on the discretions of your surgeon and customized procedure, not all guidelines will apply. Please speak with your doctor directly if you have specific questions pertaining to your surgery.

Before Your Surgery

- **Smoking/Drug Use:** Stop smoking/vaping nicotine and marijuana products at least one month before and one month after your surgery. Smoking will interfere with healing and can lead to various post-operative complications. Any recreational drug use should also be stopped during this time.
- **OTC Medications/Supplements:** Stop taking Aspirin, Ibuprofen, Vitamin E, and ALL herbal supplements at least two weeks prior and two weeks after surgery. These medications can cause prolonged bleeding. Your surgeon may also ask you to discontinue oral contraceptives. Tylenol is safe to take before/after your procedure. Please read the attached *Warning: Blood Thinning Medications* sheet for a comprehensive list of all medications to avoid.
- **Prescriptions:** Pick your prescriptions up at the pharmacy you provided on your pre-operative intake. Please let us know in advance if you have any allergies or reactions to medications, as well as or prone to nausea especially when taking narcotic pain medication.
- **Escort/Caretaker:** It is mandatory to arrange for a responsible adult to escort you home and stay with you for AT LEAST 24 hours after surgery. Depending on your procedure, you may need help getting around the house, changing your compression garment and using the bathroom. Arrange child care in advance and plan to be off work until you are feeling better and/or your doctor says it is safe to resume your activities. If you need a doctor's note, please let the office know as soon as possible.
- **Medical Clearance:** Most procedures require outside medical clearance and testing to ensure that you can safely proceed with your elective surgery. If your procedure requires clearance, we will email you the paperwork with the necessary forms to bring to your primary care physician. You should make an appointment with your doctor 3-4 weeks before your surgery date to allow for ample time to get the test results back. We should receive your clearance at least one week before surgery. If you do not have a primary care doctor, please visit ZocDoc.com, type in "Medical Clearance" in the search box along with your zip code and insurance info to find a provider near you. Most of our surgical centers also require a Covid test 48-72 hours before your scheduled procedure.

- **Sickness/Covid:** If you develop cold/flu-like symptoms, any signs of infection or illness, test positive for Covid or are exposed to Covid prior to the procedure, please alert the office immediately. In most cases, if Covid is ruled out, we can proceed as planned, but the office will need to pair with your surgeon to determine what is the best course of action.
- **Eating/Drinking:** Please consume 8-10 glasses of water during the two days leading up to surgery. The medications and general anesthesia can make you dehydrated after surgery. Ample water intake will ensure you are hydrated and aid in your recovery. If you are receiving general anesthesia or IV sedation, do NOT eat or drink ANYTHING (including water, gum etc.) at least 8 hours before your procedure. If you are receiving local anesthesia, you can drink water as well as eat a light meal the morning of your procedure.

Day of Surgery

- **Hygiene -** Please shower the night before and the morning of surgery. Do not apply any lotions, oils or body products after you shower.
- **How to dress -** Please wear dark colored, loose fitting clothing and easy on/off shoes. A top with front zipper closure or buttons and pants/sweatpants with an elastic waistband is best. Depending on your surgery, there can be drainage which will sometimes leak onto clothing so make sure to wear something you don't mind getting soiled. Do not wear any makeup or jewelry and take out all ear and face/body piercings before arriving.
- **What to bring -** Please travel light when arriving for your surgery. Bring your prescriptions, ID and insurance card if you have one. Do not bring any valuables with you as the office and our staff are not responsible if they go missing.
- **Right Before Surgery -** You will be asked to change into a gown and your surgeon will come into the room to speak with you. The clinical team will take your pre-operative photos, mark the areas that are to be treated and you will be given the opportunity to ask any questions you may have. If you are receiving general anesthesia/IV sedation, the anesthesiologist will have you sign a consent and ask you some additional questions pertaining to your medical history. An IV will also be placed to administer the anesthesia during the procedure.
- **General Anesthesia/IV Sedation -** The anesthesiologist will give you medication through the IV to aid in relaxation when you lie down in the OR. The necessary monitors and equipment will be applied to your body such as pulse oximeter, blood pressure cuff and EKG pads. You will drift off to sleep and a breathing tube will be placed and then removed before you wake up. Medications along with the anesthesia will be administered through the IV such as anti-nausea, antibiotics, steroids for swelling, and pain medications all before you wake up from surgery. A sore scratchy throat is common following surgery. In some longer surgeries, a catheter will be placed. Most patients are fully awake within 15 to 60 minutes after surgery, but may not remember much due to the nature of the anesthetics.

- **Immediately after surgery -** You will be transferred to the recovery room where you can expect to stay and be monitored for about 30 - 60 minutes. You will be released when your vital signs are stable and your nausea, bleeding and pain are minimal. A responsible adult is required to escort you home and stay with you for 24 hours post-procedure. Cab/Uber drivers are not considered as an acceptable escort. Please make arrangements ahead of time so you can be discharged promptly after surgery.

When You Get Home

- **Medication -** Keep your medication at your bedside along with a notepad to help keep track of the medications you have taken and when. Expect some forgetfulness up to one week post-op and during narcotic use. We encourage you to have food in your stomach before you take your medications to minimize any nausea. DO NOT drive or drink alcohol when taking narcotic pain medication. When you feel like you can, switch from the narcotic pain medication to Tylenol. Depending on the procedure, most patients will take the prescribed pain medication for 24-48 hours before being able to switch to Tylenol.
- **Compression Garment -** Your garment should be worn as close to 24 hours a day as possible. Only take it off when you are showering or you need to wash it. Wearing this as directed will help reduce swelling, aid with skin retraction and even help prevent certain complications (ie; fibrosis). Your garment is made of high quality materials designed to provide the proper compression post surgery. It is important you always hand wash and hang to dry to maintain the quality of your garment. Additional garments can be purchased at the office if need be. Most patients like to have at least two on rotation. As the swelling subsides, getting a smaller garment is usually necessary. Failure to wear the proper compression post surgery may affect results. In some instances, we will recommend wearing an abdominal board.
- **Showering -** You can shower 24-48 hours after surgery. Use regular soap and let the water and soap run over your incisions while you shower. Do NOT scrub the incisions. Keep your incisions clean and dry. Your surgeon may remove your dressings and/or some stitches at your post-op visit. DO NOT submerge in a bath or swimming pool for a minimum of 3 weeks post operatively.
- **Exercise -** No vigorous exercising or lifting anything over 10lbs until the doctor clears you. Exercising sooner than recommended can lead to increased blood pressure, swelling and bleeding which can lead to certain complications. Please make sure that you are getting up and walking for a few minutes every hour. Walking post surgery is great to get the blood flowing, control swelling and reduce any stiffness you may feel after surgery.
- **Constipation -** General anesthesia slows down the GI tract and narcotic pain medication increases the likelihood of constipation. Please feel free to take a gentle laxative or laxative tea if needed. Once you have stopped the pain medication, you can expect to get back to regular bowel movements within 1-2 days.
- **Diet -** As your body is healing, it will need the necessary vitamins and nutrients to heal properly. Make sure you are eating nutrient rich foods such as lean protein, fish,

fruits and vegetables. Stay away from salty foods such as fast food, chips/pretzels and some soups. It is normal to feel nauseous for the first day or two post surgery. We recommend to keep ginger ale on hand as well as saltines to aide you back into a normal balanced diet. You should be drinking plenty of water and we recommend keeping Gatorade/Pedialyte on hand to replenish your electrolytes. Pineapple is also a great anti-inflammatory and will help to reduce swelling!

- **Drains/Incision Sites -** There are two different types of drains that may be placed after surgery. If you have a *Jackson Pratt Drain* (fluid is collected in a bulb that you need to manually empty), you will need to empty this drain about 3-4 times a day or more often if necessary. The bulbs should be compressed when emptied, then closed to create a gentle suction. If you have a *Penrose Drain* (no bulb and tubing is open to drain freely) you will need to cover with a feminine pad and change the pad when soiled. Expect some oozing at the tubing insertion site. Drains are typically removed at 1-2 weeks post op. You can also expect some oozing and scabbing at the incision sites for the first few weeks. Itching, tingling and numbness in the areas that were operated on can be expected. Tingling/itching will usually resolve within 1-3 months, but numbness can last for up to a year and in some cases could be permanent.
- **Listen to your body -** Rest when you feel pain or fatigue. Your body is working extra hard to heal itself and this can lead to feeling more tired than normal, potentially even feeling more hungry. Expect soreness, fatigue, mood swings and fogginess for one week or more post operatively. Swelling and bruising will usually peak at day 4-5 post op. Be patient with the healing process and remember you will have good days and bad days; days with more swelling than others. When the bruising is gone, your body is still healing internally. Just because you are looking better on the outside doesn’t mean you are healed completely on the inside!
- **When to contact the office -** If you are experiencing excessive pain, bleeding, swelling, discoloration at incision site, fever over 101 degrees, difficulty breathing, chest pain or any other concerning symptoms.

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Procedure Specific Post-Op Instructions

Please note that we provide these instructions as a guideline. Your individual procedure and medical history may change these instructions slightly. Please partner with your doctor if you have questions regarding your specific surgery.

- **BBL/Fat Transfer -** If you are getting a BBL, no sitting or laying on your back or sides for at least two weeks. After that point, we recommend buying a BBL pillow for those times when you have to sit. Try and stay off your buttocks for eight weeks total to obtain optimal results. Remember that with fat transfers, not all fat injected will be accepted by the body. During this time, expect some asymmetry and uneven swelling for 1-3 months post surgery. Also expect for the size to go down slightly as the swelling will subside. If applicable, we recommend purchasing a female urinal. This will make it easier to use the bathroom with the compression garment on and while you cannot sit. You can buy all recommended products on Amazon or most pharmacies (CVS, Walgreens etc). No exercising/heavy lifting for at least 2 weeks and no buttocks exercises for 8 weeks or until the doctor clears you.

- **Blepharoplasty -** Please make sure you are using the prescribed eye drops daily. Keep your head elevated for at least two days after surgery and sleep with your head elevated in a recliner or with an extra pillow for seven days. Make sure to wear an SPF 50 or higher, daily, and avoid direct sun exposure/tanning beds completely for six weeks after surgery. There will be stitches that need to be removed 7-10 days post operatively. Eye makeup can then be used. Please avoid any exercise, vigorous activity and heavy lifting for 14 days post op.

- **Tummy Tuck -** You will have two Jackson-Pratt drains. One will be removed 7-10 days post operatively and depending on drainage the doctor may leave the second one in until you are 14 days post op. You will need to empty the drains throughout the day. Make sure you are compressing the bulb when closing the drain to keep the gentle suction. No abdominal exercises, heavy lifting or vigorous activity for 6-8 weeks. The doctor will clear you to go back to these activities based on your individual healing process. You may not be able to stand straight for a few weeks. Make sure you are moving and walking daily to regain your normal movement.

- **Liposuction -** You will have some drainage form the incision sites for 1-3 days post op. Please purchase feminine pads to absorb the leakage. You will need to put them inside the garment and change when soiled. The drainage should be ‘fruit punch’ colored, if it is a dark red, please contact the office. If you have a drain, it will be removed at one week post op if it doesn’t fall out before then. If applicable, we recommend purchasing a female urinal. This will make it easier to use the bathroom

- with the compression garment on. You can buy on Amazon or most pharmacies (CVS, Walgrees, etc.) sell them in the incontinence section. Numbness, tingling and itching in the areas operated on is normal and should resolve within a few months. No exercising/heavy lifting for 2 weeks or until the doctor clears you.

- **Breast Lift/Reduction/Augmentation -** Limit use of arms and over the head activity until seen at your post operative visit. No heavy lifting for four weeks and avoid strenuous exercise for 6-8 weeks. Your doctor will let you know when you can resume these activities. You will have dissolvable stitches in the areas that were operated on. Do not remove the steri-strips that cover the incisions. These will need to remain on until they fall off or until the doctor removes them. Please sleep on your back for at least four weeks. Numbness, tingling and itching at the incision sites is normal and should resolve within a few months.

- **Chin Liposuction -** There are one or two sutures in your incision. They will be removed at your post op appointment 7-14 days after your procedure. The first night, after surgery, sleep with your head elevated on 2-3 pillows. On the second day, after surgery, you can shower and get the treatment area wet. Remove the head wrap and the gauze before doing. If your doctor places steri-strips, do not remove them. These will fall off in the next week or so. The head wrap should be on at all times for the first two weeks and only taken off to shower and wash your face. Failure to wear your garment as encouraged may lead to less than optimal results. Swelling is normal and a small amount of asymmetry is to be expected. No exercise or heavy lifting until the doctor clears you to do so, about 7-10 days after surgery. If there is a physically larger difference on one side of your neck, please call the office.

- **Buccal Fat Removal -** The first night, after surgery, sleep with your head elevated on 2-3 pillows. Do not eat or drink anything too hot, too cold, or too spicy. Do not eat anything granular such as chia seeds, quinoa, tortilla chips, pretzels, etc. There is a small chance that this might get into the incision. The sutures on the inside of your mouth should dissolve on their own. In some cases, it may take up to one month to fully dissolve. Swelling is normal and a small amount of asymmetry is to be expected. No exercise or heavy lifting until the doctor clears you to do so, about 7-10 days after surgery. If there is a physically larger difference on one side of your cheek, please call the office.

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Warning: Blood Thinning Products

We have provided a list of medications/supplements you should avoid prior to your procedure. Blood thinning products can cause excessive bleeding during and after surgery. Both prescription and over the counter medications/supplements can have blood thinning properties. If you currently take any of the medications or supplements listed below, discontinue use 1 to 2 weeks prior to your procedure. Remember this is only a partial list. If you have any questions, please ask your doctor.

Reminders:

- Read the labels on all the medications that you take on a regular basis. Many products contain Aspirin (ASA or acetylsalicylic acid) and must be stopped 7 to 14 days prior to surgery. Many headache, cough, and cold remedies also contain Aspirin (ASA or acetylsalicylic acid) and should not be used.
- If you were told by a doctor to take a blood thinning medicine on a regular basis for stroke or heart attack prevention, severe arthritis, atrial fibrillation, or a prosthetic heart valve, ask your surgeon when this medicine should be discontinued.
- If you need pain, headache, cough or cold medicine during the 1-2 weeks prior to surgery, you may take products containing Acetaminophen (Tylenol).

Medications/Supplements to Avoid:

Advil
Aggrenox
Alka Seltzer
Anacin
Anaprox
Arthritis Pain Formulas
Aspirin Tablets
Aleve
Bayer
Cam Arthritis Reliever
Celebrex
Condeoitin
Coricidin
Coumadin
Darvon Compound
Depakote
Echinacea
Ecotrin
Empirin
Ephedra w/ASA
Excedrin
Fish Oils
Florina
4-Way Cold Tablets
Garlic Tablets
Ginger Tablets
Ginseng
Ginkgo Biloba
Glucosamine
Ibuprofen
Indocin
Kava
Licorice Root
Melatonin
Milk Thistle
Midol
Motrin
Naproxen
Pepto Bismol
Propoxyphene
Saw Palmetto
St. John's Wort
Trigestic
Valerian Root
Vanquish
Vitamin E (more than 200 units)
Vicoprofen
Warfarin
Willow Bark

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Medication Instructions

This document is provided as a guideline for the medication you should be taking after your procedure. Depending on your procedure, surgeon and allergies your prescriptions may slightly differ from what is below. Please partner with your surgeon if you have questions about your medication.

- **Antibiotic (mandatory) -** Risk of infection is rare, but most doctors call in antibiotics for precaution. If you received sedation from an IV during your procedure, antibiotics were also administered during surgery. If your doctor calls in an antibiotic it is mandatory to take and important that you finish the medication in its entirety.

  - Names: Augmentin (generic: Amoxicillin/Clavulanate or Bactrim (generic: Sulfamethoxazole-Trimethoprim).

- **Narcotic Pain Medication (optional) -** Your doctor will provide something to take as needed to manage your pain. Most pain medication can be taken every 6 hours, but please refer to your specific prescription for directions. Use of narcotic pain medication can cause side effects such as: dizziness, drowsiness, nausea and constipation. It is important that when you no longer need to use the narcotic pain medication that you switch to Tylenol (dosage info below). Usually patients will switch to Tylenol 24-48 hours after the procedure, some patients even opt to not use the narcotic pain medication. Reminder: DO NOT drive while taking prescription narcotic pain medication**

  - Names: Oxycodone HCL or Tylenol-Codeine (generic: Acetaminophen-Codeine)

- **OTC Pain Medication (optional) -** Always make sure to stay away from pain medication that can thin your blood (refer to blood thinning medication sheet). If you need something to manage your pain after surgery or are switching to from the narcotic pain medication, please only take Tylenol/Acetaminophen for 14 days after your surgery. Recommended dosage is 100mg every 6 hours.

- **Anti-Nausea Medication (optional) -** For certain procedures, your doctor may prescribe something to take for nausea. These can be taken usually as needed, every 8 hours. If the narcotic pain medication makes you nausea, we recommend taking the Zofran 20 min before taking the pain medication.

  - Names: Zofran (generic: Ondansetron)