



RHINOPLASTY AFTER CARE INSTRUCTIONS

GENERAL INSTRUCTIONS

- Elevate head of bed to 30-45 degree angle for one week. May use 3-4 pillows to achieve appropriate elevation.
- During the day for the first 72 hours after surgery, apply crushed ice in an ice bag or cold compresses to eyes to minimize swelling and bruising. Do not put pressure on or wet the nasal splint.
- It is normal to continue to swell after the first 48 hours. Swelling reaches its peak at 48-72 hours.
- If you have pain, take the pain medication every 4-6 hours. Alcohol should not be used while you are taking a pain medication.
- Following surgery begin with a light diet: liquids only. The next day you can begin a soft, regular diet but for 2 weeks avoid foods that require excessive lip movement such as apples, corn on the cob, etc.
- You will probably have a bloody nasal discharge for 3 - 4 days and may change the drip pad under your nose as often as needed. Do not rub or blot your nose, as this will tend to irritate it. You may discard the drip pad and remove the tape on your cheeks when the drainage has stopped.
- To prevent bleeding, do not sniff or blow your nose for the first 3 weeks after surgery. Try not to sneeze, but if you do, sneeze through your mouth.
- The incision of your nose is sensitive to sunlight after surgery. Protect the incision line from sun exposure for 12 months. Wear a wide brim hat and/or a good sunscreen (SPF-20 or greater) with both UVA and UVB protection if you are in the sun, in water or on snow for prolonged periods.
- Take pain medication with food.
- **Take a stool softener with pain medication to prevent constipation** (like Ducolax which is sold over-the counter)
- **DO NOT SMOKE**. This is very important!!!
- Do not take aspirin (or products containing aspirin) or Ibuprofen (Advil, Motrin, Midol) for 3 weeks after surgery.



• **Remember the Five W's:** o Wind: Take 10 deep breaths per hour. The most common cause of fever / elevated temperature after surgery is due to collapse of the lungs (atelectasis). In order to decrease your body temperature and expand the lungs, it is important to do this exercise. o Water: Dehydration can also cause an increase in body temperature.. o Walk: Get up and walk once every hour to keep your blood moving. This is key for preventing a blood clot. o Wonder drugs: Take your pain medication as needed. If 1 tablet is not sufficient, then take 2 tablets every 4 or 6 hours (of Percocet, Vicodin, Norco). o Wound: Observe the wound for redness, heat, discharge (pus), and openings.

BATHING AND CLEANING:

- You may shower or sponge bath 2 days after surgery.
- While the nasal splint is on, you may have your hair washed beauty salon fashion. Take care to prevent the nasal splint from getting wet. Keep nasal splint intact and dry UNTIL removed by your doctor.
- Keep the inside edges of your nostrils and any stitches clean by using a Q-tip saturated with hydrogen peroxide. This will help prevent crust from forming. You are to advance the Q-tip into the nose as far as the entire cotton tip, but no further. You will not hurt anything inside your nose as long as you are gentle in your actions.
- After the nasal splint is removed, the nose can be washed gently with a mild soap and make-up can be applied. Moisturizing creams can be used if the nose is dry.
- Use saline nasal spray (Ocean or Ayr Nasal Spray) 2-3 times per day beginning the 2nd day after surgery. Continue use for 1-2 weeks as needed to keep nasal passage clean and open.

EXERCISE AND ACTIVITY:

- Avoid strenuous activity (INCREASING YOUR HEART RATE ABOVE 100 BEATS PER MINUTE, - i.e. aerobics, heavy lifting, and bending over) for the first 3 weeks after surgery. This includes sexual intercourse and sexual activity.
- After 2 weeks you should slowly increase your activities so you will be back to normal by the end of the 3rd week.
- Avoid hitting your nose for 4 weeks after surgery.

EYEGLOSS WEAR:

- After the splint is removed, do not wear glasses or allow anything else to rest on your nose for 8 weeks. Glasses should be taped to the forehead or worn over the nasal splint.



- Contacts can be worn as soon as the swelling has decreased enough for them to be inserted.

SUTURES AND SPLINTS:

- External nasal splint will be removed at your 1 week appointment. You can shower and get the splint wet prior to your appointment, as it will be easier to remove.
- Internal splints (Doyle Splints) will be removed at either your 1 or 2 week appointment.
- Sutures will be removed at your 1 week appointment.

WHAT TO EXPECT:

- The tip of the nose sometimes will feel numb after rhinoplasty and occasionally the front teeth will feel “funny.” These feelings will gradually disappear.
- Much of the swelling will be gone in 2-3 weeks after surgery. It often takes approximately 1 year for the last 10% of the swelling to disappear. Your nose may feel stiff when you smile and not as flexible as before surgery. This is not noticeable to others and things will gradually return to normal.
- You can use nasal spray (Afrin) intermittently ONLY after the first week post-op for improved nasal breathing. And then stop it after 5-7 days. If you are taking an airline flight spray each nostril 30 minutes before takeoff and thirty minutes after landing to help prevent your ears/nose from popping.

NOSE TAPING INSTRUCTIONS:

1. Use the Micropore tape provided to cut three pieces of tape (1- 1.5 inch).
2. Place the three pieces of tape on the bridge of the nose starting with the highest part of the nose and working your way downward toward the tip of your nose
3. Cut two longer pieces of tape and place each piece of tape along each nasal wall. Pinch the ends of the tape together and cut off the extra portion
4. Add one piece of tape to tip of nose
5. Tape every night (only at night) as directed.

FOLLOW UP APPOINTMENTS

- It is important to be seen by LPS for your initial post-op checks.



- Call to schedule your appointments at 814-849-6591 between the hours of 8:00 AM and 4:00 PM to schedule an appointment.

PLEASE CALL THE OFFICE AT 814-849-6591 IF:

- Redness, increased pain at surgical incision sites, sudden increase in swelling, warmth, drainage (pus), or oral temperature greater than 101°
- Nausea, vomiting, rash, shortness of breath, or diarrhea after taking your medication