



BLEPHAROPLASTY POSTOPERATIVE CARE INSTRUCTIONS

PLEASE READ ME BEFORE AND AFTER SURGERY

THINGS TO PURCHASE BEFORE SURGERY

- * Artificial Tears—These will be used if you experience dry eyes.
- * Stool softener/laxative (Peri-Colace)—Pain medication can constipate you. Peri-Colace helps soften the feces (“the mush”) and also helps stimulate the bowels (“the push”). These should be started the day after surgery if you are taking pain medication.
- * Extra-Strength Tylenol (500mg): To be used when pain is mild to moderate in place of the narcotic pain medication.
- * Cold compresses. These will be used on your eyelids to control swelling in the postoperative period.

HAVE SOMEONE WITH YOU

- * After surgery, have an adult available to stay with you for the first 48 hours, as you will be weak and drowsy. If you are unable to have an adult stay with you for the first 48 hours, you can arrange for a nurse to care for you at an additional fee.
- * It is highly recommended that you have a competent adult with you for the duration of your stay if you are an out-of-town patient.

GENERAL INSTRUCTIONS

- * You can expect some bleeding from the stitch lines and swelling of the eyelids. However, you should call the office if you have a continuous bloody drip, significantly more swelling on one side than the other, or any severe eye pain.
- * If your eyes feel dry, use artificial tears (available over the counter) in both eyes every 1 – 2 hours.
- * All incisions will be extremely sensitive to sunlight during the healing phase. Direct sun is to be avoided.



WALKING

* It is important to get out of bed early and often after your surgery (with assistance) to prevent postoperative problems. Walking encourages blood flow throughout your legs to reduce the chance of blood clot development.

*** IF YOU HAVE SHORTNESS OF BREATH, LEG SWELLING, AND/OR LEG PAIN AT ANY POINT IN YOUR POSTOPERATIVE HEALING, GO TO AN EMERGENCY DEPARTMENT IMMEDIATELY (OR CALL 911) AS THIS COULD SIGNIFY A BLOOD CLOT.**

TRAVELING

* If you are an out-of-town patient and will be traveling back home after your surgery, please consider wearing compression stockings on the plane or in the car and remove them after landing.

* When on the airplane or car, please be sure to get up every hour to walk around and encourage blood-flow in your legs. Also, be sure to wiggle your ankles when sitting as if pressing a gas pedal to promote blood flow.

* It is safe to fly 1 week after surgery if you have been cleared to do so.

* If you experience shortness of breath after a flight or leg pain with extreme leg swelling, please visit an Emergency Department immediately to rule out a blood clot.

PAIN AND MEDICATION

* Ice operative areas (20 minutes every hour)- not directly on the skin, ice over binder or bra

* Take pain medication with food.

* Percocet (Oxycodone + Acetaminophen) or Vicodin (Hydrocodone + Acetaminophen) should be taken as directed:



o Mild to moderate pain: 1 tablet every 4 – 6 hours as needed

* If your pain is mild, or if you do not like the effects of the narcotics, you can take Tylenol® (Acetaminophen) 1000mg every 8 hours (which would be 2 tablets of the Extra Strength Tylenol®, purchased over the counter). Please do not exceed 3000mg in a 24-hour period. Please do not mix the Tylenol® with the narcotic pain medication since the narcotic pain medication consists of 325mg of Tylenol®

* If you require additional pain medication please contact our office at 814-849-6591.

* If you are under the care of a pain management provider or already take narcotic pain medication or an anti-anxiety medication, our office **WILL NOT** be providing you with an initial RX or refill for the aforementioned. It is your responsibility to obtain the necessary medications/refills from your prescribing provider. Please make sure to bring the necessary medications if you are visiting us from out-of-town as we will not be providing it.

* Our office will not be providing any additional medications that are unrelated to the surgical site (i.e., blood pressure meds, muscle relaxers, sleeping pills, etc.). Should you require these in the postoperative period, you will be responsible for acquiring them from your primary care provider.

* Take a stool softener with pain medication to prevent constipation.

* **DO NOT DRIVE WHILE TAKING PAIN MEDICATION.** These medications can result in drowsiness. If you are pulled-over while driving under the influence of narcotics or scheduled substances, you will get a DUI!

* **DO NOT DRINK ALCOHOL WHILE TAKING PAIN MEDICATION.** This can be a deadly combination.

* Only take the narcotic pain medication if needed. The quicker you can wean off of the pain medication, the better you will feel and heal.

DO NOT SMOKE This is very important!!!

* Smoking (tobacco, marijuana, or vapes) can result in a lack of blood supply to tissues and fat causing tissue death or delayed wound healing. Even 0% nicotine vapes contain a trace amount of nicotine that the FDA accepts as 0%.

* Do not allow those caring for you to smoke around you as second-hand smoke can be detrimental to your recovery.



* Smoking can resume 6 weeks after surgery as long as no challenges in healing are present

SUPPLEMENTS:

* Do not take aspirin (or products containing aspirin), anti-inflammatories, or Ibuprofen (Advil®, Motrin®, Midol®) for 3 weeks after surgery. Also do not begin herbal supplements until 3 weeks after surgery.

* Phentermine or appetite suppressants should not be taken until 6 weeks after surgery as these supplements increase heart rate and blood pressure and can interfere with your recovery.

REMEMBER THE FIVE W'S:

* The most common cause of an elevated temperature/fever after surgery is due to collapse of the lungs (atelectasis). This is a normal occurrence as a result of anesthesia and the physical stress your body is undergoing. In order to decrease your body temperature and expand the lungs, it is important to do the following:

* Wind: Take 10 deep breaths per hour for the first 72 hours

* Water: Dehydration can also cause an increase in body temperature. It is important that you remain hydrated since surgery can deplete your body of water. 64 ounces of water a day is encouraged.

* Walk: Get up and walk once every hour to keep your blood moving. This is key for preventing a blood clot.

* Wonder drugs: Take your pain medication or Tylenol® as needed. An increase in pain can cause an increase in body temperature.

* Wound: Observe the wound for redness, heat, discharge (pus), and openings.

SLEEPING POSITION:

* After surgery it is best for you to keep your head elevated at a 45° angle when in bed for one week. You should also sleep in this position to minimize swelling to your eyes.



COLD COMPRESSES:

* Use cold compresses on eyelids after surgery to reduce the amount of swelling you will have (make sure you keep these compresses cold, and change them every 15-20 minutes). You can also make an “ice burrito” by wrapping a handful of crushed ice in a clean washcloth or small towel and then hold this cloth against the operated area gently.

SHOWERING AND BEAUTY:

* 24 hours after surgery, you can begin washing your face be very gently with a mild soap and rinse with water. It will not hurt to get water on the stitches or in the eyes.

* You can shower 24 hours after surgery.

* Contacts can be worn when the eyes start feeling normal and the majority of the swelling has subsided. This is approximately 2 weeks after surgery. Wear glasses until then. It is common to have blurred vision after your procedure as the cornea can swell – it can take a few weeks to resolve – be patient, it will go away.

* Cosmetics can be worn on the face 5 days after surgery. However, eyelid or eyelash cosmetics should NOT be worn until after the eyelid sutures have been removed.

EXERCISE AND SEXUAL ACTIVITY:

* No overheating for the first 3 weeks (spas, exercising in the sun, etc).

* Cardio may resume at 4 weeks following surgery.

* You may begin swimming 3 weeks post-operatively if healing is complete.

WHAT TO EXPECT:

* Abdominal bloating is to be expected in the early postoperative period. Bloating results from sodium present in your medications and in the anesthesia.

* Most patients report difficulty sleeping and difficulty with pain management the first night after surgery. This is usually secondary to the effects of anesthesia and should subside within 24-28 hours.



- * Tearing and dry eyes often occur after eyelid surgery. This will stop as the swelling subsides over the first several days.
- * Tightness of the eyelids is a normal feeling after surgery and may make it hard to close the eyelids completely. There may also be a feeling of numbness of the eyelids. Both sensations will subside with time.
- * Red discoloration and swelling of the whites of the eyes (which can be daunting in appearance) is normal as well. This is called chemosis. This is painless, will not harm your vision, and will disappear completely over time. Swelling may also cause the lower lid to pull away from the eye. This will subside as the swelling goes down.
- * You will experience swelling after the surgery. Swelling is the accumulation of fluid which is the body's way of healing. The swelling will probably be at its worst on the 2nd or 3rd day after surgery. The swelling will gradually improve over subsequent weeks. Some residual swelling can last as long as 1 – 2 months.
- * You should expect some slight oozing of blood from the incision site over the first 2 days. This is normal during the healing process.



- * Bruising around the eyes may last 1 – 2 weeks.
- * It takes 6 MONTHS FOR FINAL RESULTS to appear. In the interim, you may notice incision asymmetry and swelling that changes from day-to-day. Be patient please and try not to focus on these issues before the 6-month period.
- * A burning sensation (raw, sensitive) or sharp shooting pains along the incision line is normal and indicative of nerve regeneration. These “neuralgias” will burn out by 9 months.
- * Numbness is expected to resolve by 9 months on average.



EMOTIONAL EXEPECTATIONS FOLLOWING SURGERY:

* It is not unusual for patients to undergo significant emotional “ups and downs” after any type of surgery. Factors such as underlying stress, medications, and/or psychological tendencies can result in patients experiencing a “post operative depression” that generally resolves after a few weeks. Having a partner, family member, or friend who is supportive can help with this process. Understanding the stages of emotional “ups and downs” can help patients stay calm and recover from this emotional process faster:

Phase 1: Being Out of It Swelling and discomfort is most severe over the first few days after surgery. Pain medications also can make you disoriented and emotional.

Phase 2: Mood Swings Having just had surgery, patients are adjusting to a sudden change in their appearance with much anticipation. The presence of bruising, swelling, and asymmetries will distort a patient’s results thereby concealing the final outcome. Mood swings (especially sadness), worry and depression are common emotions as a result. Patients may even ask, "What have I done?" or think that "I never should have done it."

Phase 3: Being over critical During the second week, patients will probably be feeling a lot better. The swelling and muscle cramping/spasms will be decreasing and sutures will be out. Because of anticipation, it is natural for patients to look critically at their new body worrying about symmetry, scars, and so on. At this point, it's normal to wonder if they have achieved their goal and what they paid for. This is too soon to tell and most concerns are resolved with time.

Phase 4: Happy at last Finally, about 3 – 6 months out of surgery, patients will probably start liking how they look and are feeling much better.

FOLLOW UP APPOINTMENTS:

* It is important to be seen for your post-op appointments.

* It’s important to keep in mind that these appointments are patient-specific and may vary depending on your own individual healing and/or complications.

* LPS can evaluate you over the phone, via email, or from a distance. If you have a cosmetic or functional complication, please plan to visit our office for a postoperative visit. We can provide referrals and do our best to help manage complications from a distance.



* Call to schedule your appointments at (814) 849-6591 between the hours of 8:00 AM and 4:00 PM, Monday – Friday. The office is closed on Saturday and Sunday.

* The office is closed on Saturday and Sunday. Should you experience a complication over the weekend, you will need to be seen by an urgent care and/or Emergency Room