

Elite Plastic Surgery

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EXCESS SKIN REMOVAL

Post Operative Instructions

1. After surgery, patient will be in recovery room for approximately 1-2 hours. The family will be contacted when the patient has been transported to the recovery.
2. A member of the plastic surgery team will speak with family/chaperone regarding post-operative instructions, answering questions, and to provide update on the course of the procedure(s).
3. Patient generally stays 1 night in the hospital and is discharged the day after.
4. Dressings consist of medical grade glue/tape, soft padding, and compressing dressings.
5. Drains are commonly placed in the surgical site(s). Hospital staff will instruct you of proper drain care prior to discharge.
6. The first follow-up visit is normally within a week following surgery. You are encouraged to make your initial follow-up appointment prior to surgery.

Post-Operative Instructions:

- 1. DIET:** Resume normal diet. Attempt to increase fluid and fiber intake in order to prevent constipation that is known side effect of narcotic medication. Stool softeners should be taken with narcotic medication. Our suggestion for medications to avoid constipation: Docusate Sodium 100mg by mouth, twice daily and Senna daily as well.
- 2. ACTIVITY:** You will awake lying with your hips in a flexed position. You are encouraged to ambulate the day of surgery. It is common for you to feel “tight” in your surgical areas. You can extend the surgical area until you feel a pull and no further as this can stress the incision sites. You will wear compression stockings and may be required to take anticoagulant medication depending on your prior medical status and how well you are able to ambulate after surgery.
- 3. EXERCISE:** Non-strenuous activity only is allowed. You should not lift greater than 10 pounds. These restrictions should continue until they are removed at follow-up visits.
- 4. PAIN:** Narcotic medication will be prescribed to the patient the day of discharge from the hospital. Your surgeon uses local anesthetic during the surgery that controls most of the pain for up to 10 hours postoperatively. Further, pain will be controlled in the recovery room prior to discharge. Aspirin and other anti-inflammatory drugs should not be taken unless specifically prescribed by your surgeon.
- 5. FOLLOW-UP SCHEDULE:** Normal follow-up routine includes a visit to the office weekly until drain removal and then at 4-6 weeks after surgery.

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- 6. WORK:** Patient is advised to prepare for 4 weeks off from work. The recovery period could take longer if there are complications after surgery.
- 7. INCISIONS:** Sutures are most often internal and not visible on the surface. Typically they dissolve on their own with time. In some situations, there may be external sutures placed that may require removal. We will remove and care for sutures as necessary in-clinic. Incisions may show mild signs of redness and inflammation for the first 2 months postoperatively. This is normal and should resolve with time. It is normal for some oozing from wound edges in the initial postoperative period. Wound care and scar care instructions will be based off of healing progression as assessed at office visits. Do not place ointment or other products on incision lines until instructed by your surgeon.

PLEASE DO NOT PLACE ICE PACKS OR HEATING PADS ON OR NEAR ANY SURGICAL SITES DUE TO ALTERED SENSATION AND INABILITY TO FEEL WHEN TOO HOT/TOO COLD!!!
- 8. DRESSINGS:** Dressings are simple and consist of medical grade glue, soft padding to absorb any oozing from the wounds, and compression dressing. Do not pick or attempt to remove the glue, which may be tinted. It will fall off with time. Replacing padding daily keeps the area clean.
- 9. COMPRESSION DRESSING:** Compression dressing over surgical sites should be worn at all times for the first 4 weeks. It can be removed for washing and then immediately reapplied. Following this, the compression garments should continue to be worn during the day for an additional 8 weeks.
- 10. DRAINS:** Drain care instructions will be provided prior to discharge and progress will be followed in clinic. Drains are removed when output is less than 30mL in a 24 hour period.
- 11. BATHING:** Incisions should be kept as dry as possible until drains are removed. Patient's can shower after 48 hours postoperatively with a cloth and gentle antibacterial soap and patted dry. **DO NOT SCRUB YOUR INCISIONS.** We recommend wearing a lanyard in the shower to hold your drains to avoid tension at the drain site. No bathing or submerging in still water (i.e. pool, hot tub, etc.) for at least 4 weeks until cleared by your surgeon.
- 12. MEDICATIONS:** Medications will be prescribed on a case-by-case basis dependent on previous medical history, family history, etc. Medication instructions will be provided upon discharge and by the pharmacy. Please take medications as instructed and contact your surgeon's Medical Assistant with any questions.
- 13. HYPERBARIC OXYGEN THERAPY:** We have a Hyperbaric Oxygen Machine in the office to help our patients recover faster but can be utilized for much more. Hyperbaric oxygen therapy (HBOT) is a medical treatment that involves breathing pure oxygen in a pressurized chamber. HBOT has been used to treat a variety of medical conditions, including decompression sickness, carbon monoxide poisoning, and wounds that are slow to heal.

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- a. In recent years, there has been growing interest in the potential use of HBOT for longevity and anti-aging. This is because HBOT has been shown to have a number of beneficial effects on the body, including:
 - i. Increased production of new blood vessels
 - ii. Reduced inflammation
 - iii. Improved wound healing
 - iv. Increased production of antioxidants
 - v. Reduced oxidative stress
 - vi. Increased levels of nitric oxide
 - vii. Improved cognitive function
 - viii. Increased lifespan in animal studies

Medications Prescribed (not all medication may apply)

Scheduled Medications:

- **Antibiotic: Keflex (cephalexin) 500mg (started day of surgery, is a SCHEDULED medication, please follow prescription ordered)** is an antibiotic you must take for a total of 5 days.
- **(*May not apply to you) Blood thinner: Lovenox 30 mg/0.3 ml injectable solution (started day AFTER surgery)** is used for prevention of blood clots after surgery. You or your caregiver will administer 1 subcutaneous injection into your thighs daily for 5 days.
- **Tylenol (Acetaminophen)** (Age GREATER than 60: 1000 mg every 8 hours) (Age LESS than 60: 1000 mg every 6 hours).

Highly Recommended: Scheduled Medication over the counter

- Docusate Sodium (Colace) AND Senna: Stool softener: start one day following your surgery EVERY DAY if you're taking narcotic pain medication.
- Magnesium hydroxide (Milk of Magnesia): Bowel Stimulant start one day following your surgery if you have not had a bowel movement since surgery. These may be taken together with Senna and Colace.

As needed:

- **Anti-inflammatory: Toradol (ketorolac) (started day of surgery as needed, please follow prescription ordered)** This is a different form of Ibuprofen so please stay away from other anti-inflammatory while taking this medication.

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- **Nerve Pain: (itching/burning/tingling): Gabapentin (Neurontin) (started day of surgery as needed, please follow prescription ordered)** is used for pain relief every 12 hours. Please let us know if you are taking any prescriptions for mood-altering (depression or bipolar) medications as these can potentially interact.
- **Muscle Relaxer: Cyclobenzaprine (Flexeril) 5mg (started day of surgery as needed, please follow prescription ordered)** is a muscle spasm medication.
- **Narcotic Pain Reliever: Oxycodone 5 mg (started day of surgery as needed, please follow prescription ordered)** is an oral narcotic prescribed to manage your pain.