



PACIFIC COAST

FACIAL PLASTIC SURGERY

PRE-OPERATIVE INSTRUCTIONS FOR EYELID SURGERY (BLEPHAROPLASTY)

THREE WEEKS BEFORE SURGERY

- Laboratory tests and EKG (if they are required) must be done. If you are having your preoperative testing at a lab other than the one we suggested, please have the written results arrive at our office one week before surgery (our fax number is 833-719-8711).

- **Surgery will be rescheduled if any chance of pregnancy.**

- All fees are due, including any surgical, facility and anesthesia.
Two Weeks Before Surgery

- Do not take products containing aspirin, ibuprofen (eg. Advil, Motrin), or Vitamin E. Many pain relievers; cold and sinus medications contain aspirin or ibuprofen. **See the “Medications to Avoid Prior to Surgery” document.**

- Refrain from all nicotine products, including cigarettes, gum, vaping or “the patch.” Nicotine interferes with healthy circulation and may affect the result of your surgery.

- Do not drink alcohol for 1 week before and after surgery

- If your destination after surgery is more than 30 minutes from the office, you must plan to stay in a local hotel on the night of surgery. Your patient coordinator can assist you with this.

DAY BEFORE SURGERY

- The Surgery Center or Office will call the day before to inform you of your arrival time for surgery.
- **DO NOT EAT OR DRINK ANYTHING AFTER MIDNIGHT (this includes water and gum chewing) if you are having anesthesia. SURGERY MAY BE CANCELLED IF THIS IS NOT FOLLOWED.** A fasting state is required in order to receive sedation for surgery. You will be instructed if there is any medication you should take on the morning of your procedure, if so take this with only a small sip of water.

DAY OF SURGERY

- Go to designated surgical location.
- You may shower and shampoo the morning of surgery. Do not wear makeup, hair sprays or gels, or nail polish. You may leave acrylic nails on
- Avoid clothing that must be pulled over the head. Please wear loose fitting clothing.
- Do not wear jewelry of any sort or bring valuables to surgery.
- Do not wear contact lenses.

POST-OPERATIVE INSTRUCTIONS BLEPHAROPLASTY

Incisional Care Following Blepharoplasty

- Ice packs should be used within the first 48 hours after surgery to help with swelling. Apply ice for 15-20 minutes out of each hour while awake. Be sure they are lightweight. Never apply ice directly to the skin. Frozen peas work well.
- Apply ophthalmic ointment to eyelid sutures twice daily and into your eyes at bedtime.
- Apply artificial tear drops to eyes every 2 hours and more as needed for dryness, tearing, itchiness
- Eyelid sutures will be removed 5-7 days after your procedure.
- Avoid contact lenses for 3 weeks post surgery
- Avoid applying make up to eyelids for 3 weeks.

Activity Restrictions

- Limit your activity over the first week following surgery.
- You are encouraged to walk around the house on the day of surgery and thereafter. This helps to prevent blood clots from develop in the legs. Move/pump your legs frequently while lying down. This also helps in preventing blood clots from developing.
- When you rest or sleep, keep your head elevated 2-3 pillows and avoid turning of your side. If you overexert yourself, bleeding or prolonged swelling may result.

- Avoid bending, lifting, pulling, pushing, straining and aerobic activities for 3 weeks.
- You may begin to return to regular exercise 3 weeks after surgery. Ease into this, gradually increasing your exercise level back to normal by 5-6 weeks from surgery.

Diet

- Alcohol consumption should also be limited as this may raise the blood pressure and initiate bleeding. Do not drink alcohol during the first week.
- Drink plenty of fluids following surgery, as dehydration can contribute to nausea.
- Small amounts of food 20 minutes before taking postoperative medications (especially pain medications and/or antibiotics) can prevent nausea.
- If you vomit or feel nauseated, you should delay food and pain medications until the nausea passes. Take only 2-3 ounces of clear liquids at hourly intervals until the nausea subsides. If this symptom persists, call for anti-nausea medications, as subsequent vomiting may be harmful and lead to complications.

Pain, Swelling, Bruising, Infection

- It is unusual to have significant pain after blepharoplasty.
- Some swelling and bruising is to be expected. Bruising is treated with Arnica or Bromelain, an herbal supplement. Swelling and bruising is maximal at 48 hours post-surgery and gradually subsides over the following 10-14 days.

- Infection is unusual. Fever, localized swelling with redness and tenderness may signify a developing infection and should be reported. Appropriate treatment will be initiated.
- Your final results will occur between 6-12 months.

Bathing

- Following surgery you may bathe, but do not submerge your head in the water.
- You should take care to prevent getting your sutures wet for 24 hours.

Other Common Postoperative Instructions

- A responsible adult must provide transportation for you after surgery (public transportation is not permissible) and remain with you until the morning following the procedure.
- You will need to arrange transportation for your appointment at our office on both the day following surgery as well as day the day your sutures are removed.
- Do not drive anytime that you are taking pain medications.
- Avoid making major decisions or participating in activities requiring judgment for 24 hours.
- Smoking/Vaping should be strictly avoided as it interferes with the blood supply to the healing tissues and slows subsequent healing.
- Take all medications as instructed postoperatively.
- Avoid excess sunlight to the incisions for at least a year. Even mild sunburn may cause prolonged swelling or irritation of the healing incisions.

- Do not compare your progress with that of other patients. Remember that everyone's healing process is unique. Also, if you have any questions or concerns, call on us. Your family and friends may mean well, but you can receive wrong information.

CALL THE OFFICE IF YOU DEVELOP ANY OF THE FOLLOWING:

- Fever of 101 degrees F or greater.
- Pain not relieved with pain medication.
- Swelling, redness, bleeding, and/or foul drainage from incision area.
- Persistent nausea and/or vomiting.
- Any other concerns.

Office Telephone: 949-273-3112

I have reviewed and understand the instructions provided for my procedure.

Patient Name (print): _____ Date: _____

Patient Signature: _____

Witness Signature: _____ Date: _____



PACIFIC COAST

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Your surgery will be performed safely and with care in order to obtain the best possible results.

You have the right to be informed that the surgery may involve risks of unsuccessful results, complications, or injury from both known and unforeseen causes. Because individuals vary in skin textures, tissue, circulation, and the healing process, as well as anesthetic reactions, there can be no guarantee made as to the results or potential complications.

The following complications have been reported in medical literature. They are listed here for your information not to frighten you, but to make you aware and more knowledgeable concerning this surgical procedure. They will be discussed again at your preoperative appointment.

BLEPHAROPLASTY (upper/lower eyelid surgery)

Dry eyes: Most common complaint immediately following surgery. Typically resolves within 24-72 hours.

Epiphora: Excessive tearing down the cheek due to excess secretion of tears or to obstruction of the lacrimal duct. Common in the first 24-72 hours.

Lagophthalmos: Difficulty in closing the eyelid. Common immediately postoperatively, but may persist.

Alteration of vision: Usually temporary, but can be permanent. Exceedingly rare.

Wound separation: The incision line separates after the sutures are removed. Rare.

Infection: Exceedingly uncommon, but may occur.

Corneal injury: Either by trauma directly or due to exposure.

Telangiectasis: (Superficial visible small blood vessels).

Scarring: Keloid scars are extremely rare but healing may result in a visible scar.

Pigmentation: Occasionally, patients with dark skin will experience darkening of skin secondary to bruising for extended periods of time, which may be well beyond normal healing periods.

Inclusion cysts: Small, white cysts in or near the incision line.

Hematoma: Accumulation of blood behind the eyeball or under the skin.

Asymmetry of eyelids: Usually unmasking a previous asymmetry.

Loss of eyelashes

Ptosis: A drooping of the upper eyelid. Rare

Ectropin or scleral show: A pulling downward or change of shape of the eye.

Blindness: Rarest of all complications. Has been reported in setting of uncontrolled high blood pressure or excessive, strenuous activity immediately after surgery.

Secondary blepharoplasty: Occasionally required to modify under-correction or over-correction.

Any touch-up surgery that may be necessary is not done for at least 6 months. This is usually a small office procedure and no physician's fee is charged. There is however, a nominal charge for the facility, supplies, and anesthesia if sedation is required. I have read the complication list and am aware that any of the above may occur.

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Patient Name (print): _____ Date: _____

Patient Signature: _____

Witness Signature: _____ Date: _____