

PRE-OPERATIVE INSTRUCTIONS FOR RHINOPLASTY (NASAL SURGERY)

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 NASAL SURGERY

Incisional Care Following Nasal Surgery

- You may have an external nasal splint in place for 1 week after surgery. It is ok to shower/bathe but keep the nasal splint dry.
- 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.
- Keep you head of bed elevated 30-45 degrees for the first 3 days following surgery to minimize bruising and swelling.
- Clean your incisions and inside your nostrils with a q-tip and hydrogen peroxide and apply double antibiotic ointment 4x/day until all sutures are removed
- You may notice nasal drainage for the first 24-48 hours following surgery. Replace your nasal drip pad as needed.
- Sutures will be removed 5-7 days after your procedure.
- No nose blowing for 3 weeks following surgery. Sneeze with your mouth open.
- Use nasal saline mist every 2 hours starting 3 days after surgery and more often as needed for nasal congestion.

- Avoid taking narcotic pain medication on an empty stomach. You may also take extra strength Tylenol, but avoid Aspirin, Advil, or Aleve as these products increase the risks of bleeding and bruising.
- In the event of a nosebleed, keep you head elevated and place an ice pack across the nose and eyes. Apply 3 sprays of Afrin (oxymetazoline) to each nostril. If bleeding persist after 15 minutes, reapply 3 sprays in each nostril. If bleeding persist, call the office.
- You will feel congested and like you have a cold following surgery for 1 week.

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 rhinoplasty.
- 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.

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.

Witness Signature: ______Date:_____



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.

SEPTOPLASTY/RHINOPLASTY (nasal surgery)

Hemorrage: (bleeding). A flow of blood, especially if it is profuse.

Hematoma: A collection of blood caused by a break in a blood vessel.

Edema & ecchymosis: Swelling and black & blue spot(s) that can cause persistent dark areas under the eyes.

Infection: Rare. .8% - 1.6% reported incidence.

Pereostitis: Inflammation along sites of bone breakage is unusual.

Skin Problems: Excessive dryness, dimpling, redness, skin pustules, telangietasis (small spider-like blood vessels visible through the skin). Actual skin loss is possible, but very rare.

Injury to lacrimal duct: (Tearing) apparatus- due to proximity of surgical site. Usually these problems are due to surgical swelling and improve spontaneously.

Septal Perforation: One or more holes of the septum (cartilaginous separation Updated 4/2013 sc between right and left sides of nose) can be permanent or repairable.

Nasal Obstruction: A blockage, clogging, or narrowing can be permanent or Reversible - 10%.

Altered sense of smell: Almost always reversible - 10%

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: |
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| | |
| Patient Signature: | |
| | |
| Witness Signature: | Date: |