

RHINOPLASTY INSTRUCTIONS

Preoperative Instructions:

- I. Please read and familiarize yourself with these instructions both **BEFORE** and **AFTER** surgery. By following them carefully, you will assist in obtaining the best possible results from your surgery. If questions arise, do not hesitate to communicate with me and discuss your questions at any time. Take this list to the hospital with you and begin observing these directions on the day of surgery.
- II. You will report to the hospital according to the instructions given to you by our office. Preoperative lab testing may be necessary, depending upon your health status and age. This testing should be performed within two weeks of your surgery. On the day prior to your surgery, you should confirm with our office your necessary arrival time at the hospital or surgery center. You may not eat anything or drink anything that morning, or your surgery will be canceled. In addition, if you have a cold, cough or fever, the anesthesiologist will evaluate you prior to surgery.
- III. Please remove all jewelry, including **all** body piercings.
- IV. Physicians give some patients prescribed medications to take as directed prior to surgery. Please read the instructions carefully.
- V. **Please see the list of medicines, including aspirin and ibuprofen, that you must discontinue two weeks prior to surgery.**

INSTRUCTIONS FOLLOWING RHINOPLASTY

- I. Every operation is accompanied by swelling of the surrounding tissues. This swelling is usually greatest the second or third day after the operation. The majority of the swelling will subside within one week. There are several things you can do during the first week that will help the swelling to subside.
 1. During the day, stay or sit upright or stand as much as possible.
 2. On the first two to three nights after surgery, sleep with the head of the bed elevated with three pillows or **preferably** in a recliner chair at a 45-degree angle.
 3. Apply ice compresses (not an icebag) to the face and eyes but **not the nose** for 20 minutes every hour during the day.
 4. Avoid bending over or lifting anything heavy.
- II. You should keep the upper lip as immobile as possible for the first week.
 1. You should avoid grinning and smiling.
 2. Women should use a brush to apply lipstick and not pull the upper lip down when applying it.
 3. You should clean the upper teeth with toothpaste on a washcloth. You can brush the lower teeth as usual.
 4. Avoid chewing gum or food that requires excessive chewing.
- III. Facial care
 1. Wash face gently with mild soap and water twice daily after discharge from the hospital.
 2. Men can begin shaving (except the upper lip area) as soon as desired.
 3. Coat lips with ChapStick® or Vaseline® if they become dry.
 4. Do not tweeze eyebrows for one week.
 5. Women can use makeup after discharge from the hospital if applied gently. Max Factor's Erase, Cover Away by Adrien Arpel or On Your Marks by Kenneth Mark, are very good to color any discoloration. Our aesthetician can also counsel you regarding cover-up.

IV. Nasal care

1. Take care not to bump the nose, especially while sleeping.
2. **Do not blow the nose for one week, and then you may blow both sides gently at the same time.**
3. Avoid sneezing. If you have to sneeze, “sneeze” through your mouth.
4. Your nose will be stuffy, and you can expect blood-tinged drainage for several days. You can wear a “mustache” dressing and change it three to four times a day, but do not rub nostrils or base of nose with a Kleenex® or handkerchief. Should the dressing stick to the nose, you may loosen it with a few drops of peroxide.
5. Avoid “sniffing” if the nose feels blocked. This action will only aggravate it because the suction creates more swelling.
6. For a stuffy nose, you may use nose drops, such as Afrin®, for two to three days. Do not use any longer than three days. After three days, you may use Ocean Nasal Spray four to six times daily.
7. After leaving the hospital, you should clean the nostrils with a cotton applicator soaked in peroxide three times daily. You should follow this with a light application of bacitracin ointment to both nostrils.
8. After the physician removes the dressing, you should clean the skin of the nose with a cleansing cream or a mild soap twice daily for one week to remove oily materials. You should do this cleaning gently.

V. Other

1. You can wear eyeglasses on the nasal bandage, but after your physician removes the bandage, you should suspend the eyeglasses from the forehead with adhesive tape. Eyeglasses must not rest on the nose for six weeks after surgery because they can change the contour.
2. You may wear contact lenses after three to four days.
3. Protect the nose from exposure to the sun for six weeks. Wear a wide-brimmed hat if you have to be in the sun for prolonged periods. Sunscreen with micronized zinc is a must.
4. You may get your hair washed in a beauty salon or do it yourself after one week, but do not sit under a large hair dryer for two weeks. Do not get nasal dressings wet.
5. No swimming, gym or strenuous athletic activity for one month. No diving or water skiing for two months. Avoid significant exertion for two weeks.
6. Avoid smoking and alcohol until the bandage is removed.
7. For one week, wear clothing that fastens either in the front or back rather than the type that must be pulled over the head.
8. It is wise not to pick up small children for two weeks after the operation as they may accidentally hit your nose.
9. Report:
 - a. any excessive pain
 - b. any rise in temperature over 102 degrees
 - c. any injury to your nose

VI. Further comments

1. When released from the hospital, you should make an appointment to be seen six to seven days from the day of the operation. At that time, we will remove the bandage. This process is not uncomfortable.
2. After we remove the bandage, the nose will appear fat and may appear “turned up” too much. This will subside to a very large extent within a week.
3. Most discoloration will have disappeared within seven to 10 days. The same is true of the swelling. The remainder of the swelling, which the patient sees more than anyone else sees, is present in progressively diminishing amounts for several weeks.
4. The thicker and oilier the skin, the longer it takes the nose to reach its final steps.
5. The tip of the nose sometimes feels “numb” after rhinoplasty, but this feeling eventually disappears.
6. After we remove your dressing, we urge you to resume normal activities (with the exception of the prohibitions listed above) as soon as possible. It has been our experience that when patients follow this advice, their recovery greatly accelerates.

VII. Potential Risk and Complications of Rhinoplasty

1. Bleeding that may require packing or, in rare cases, a return to the operating room to control
2. Infection is a rare complication. Look for progressive redness.
3. Moderate to severe pain
4. Lack of desired cosmetic or functional results can rarely occur, and revision surgery may be necessary.