



COMMONWEALTH

FACIAL PLASTIC SURGERY

POSTOPERATIVE INSTRUCTIONS - NASAL SURGERY

The following instructions have been designed to answer practically every question that might arise regarding the "do's" and "don'ts" after surgery. You and your family should read these several times to become familiar with them. Follow them faithfully, because those who do generally have the smoothest postoperative course.

SWELLING

Every operation, no matter how minor, is accompanied by swelling of the surrounding tissues. The amount varies from person to person. The swelling itself is not serious and is to be expected after your surgery. It sometimes is worse on the second postoperative day than it was on the first, and in the mornings.

Remember is that swelling will always subside eventually. You can help decrease the swelling in the following ways:

1. Sleep with your head elevated until all of the dressings have been removed from the nose. Use an additional pillow or two under the mattress, if necessary.
2. Stay up (sitting, standing, walking about) as much as possible after your return home. THIS IS IMPORTANT. Of course, you should rest when you tire.
3. Avoid bending over or lifting heavy things for one week. Besides aggravating the swelling, this may raise your blood pressure and start a hemorrhage.
4. Avoid hitting or bumping your new nose. It is wise not to pick up small children.
5. Avoid excessive sunning of the face during the first month after your operation. A sunscreen is always advisable, but a total sunblock is suggested for the first month.
6. Do not tweeze your eyebrows for one week.
7. Avoid "sniffing", that is, constantly attempting to pull air through the nose as some people do when their nose feels blocked. This will not relieve the sensation of blockage - it will only aggravate it because the suction created on the inside will cause more swelling.
8. Avoid rubbing the nostrils and the base of the nose with Kleenex or a handkerchief. Not only will this aggravate the swelling, but also it may cause infection, bleeding, or the accumulation of scar tissue inside the nose. Use the "moustache" gauze dressing instead if discharge is excessive.

DISCOLORATION

It is not unusual to have varying amounts of discoloration about the face. Like swelling, the discoloration may become more pronounced after you have been discharged. It usually lasts not more than a week or two, all the while decreasing in intensity. If the nasal bones were not reshaped, there is usually very little bruising. The measures which will help your swelling subside will also be working to decrease the amount of discoloration. You can camouflage the discoloration to some extent by using a thick makeup base.

NUMBNESS

After surgery you will notice that the tip of your nose feels firm, and it is not uncommon for the nose to feel numb for a short time. If you have incisions inside your nose, you may be able to feel minor irregularities in its surface until all swelling disappears.

NASAL PACKING AND BLEEDING

For the first twenty-four hours, your nose will be lightly packed to decrease the oozing. Nevertheless, it is not uncommon to soak several gauze pads (your moustache dressing) during the first several hours after surgery. The frequency with which these are changed should decrease. If it does not, go to bed, apply ice compresses about the face, and report it to the office by telephone. You may be told to return to the office or hospital.

You will be seen in the office or hospital the day after surgery for removal of the packing. Some ooze immediately afterwards is to be expected.

Change the drip pad as needed using 4x4 gauze and tape.

Whenever the nasal passages are blocked, such as when you have a cold or an allergy, the nasal glands produce more mucous than normal. Your nose is blocked from the postoperative swelling, so you can expect an increase in mucous drainage for several days. It will be blood tinged and should cause you no concern unless the drainage looks like pure blood and flows freely, as when you cut a finger. If this happens, please call the office immediately.

DO NOT attempt to remove blood clots or anything else from the nostrils.

If a turbinate resection was part of your nasal procedure, bleeding can occur from this area for up to six weeks after your surgery. Be diligent in using the nasal drops and ointment. This helps the healing process and the dissolving of the crusts that form on the turbinates.

Your exercise regimen will be curtailed at least to some extent for the first few weeks following surgery. Upper body exercise is especially prohibited, as it is more likely to cause turbinate bleeding.

PAIN

There is usually little actual pain following nasal surgery, but you may experience a deep bruised sensation as a result of the postoperative swelling that occurs. As is usually the case with such things, this seems worse at night and when one becomes nervous.

The usually prescribed drugs which minimize pain often cause sensations of light-headedness, particularly in the immediate postoperative period. This may seem to make your recovery more tedious. Please take the pain medicine as needed. Do not try to "tough it out" if you are uncomfortable. DO NOT take aspirin, ibuprofen, or any other NSAIDs (Non-Steroidal Anti-Inflammatory Drugs).

NAUSEA

Sometimes the anesthesia, the pain pills, or swallowed blood will make you nauseated. If this occurs, a suppository can be ordered to make you more comfortable.

DEPRESSION

It is not unusual for an individual to go through a period of mild depression twelve to thirty-six hours after surgery. Even though you very much want this surgery, and even though we have tried to tell you what to expect postoperatively, you may be somewhat shocked at seeing your own face swollen and bruised.

This is a very temporary condition which will subside shortly. The best "treatment" is to busy yourself with the details of your postoperative care and try to remember that the recovery period will soon be over.

INSOMNIA

You may experience some difficulty falling asleep. For this we have prescribed a sleeping pill. If you must take one, remember that such drugs make some people feel light-headed and weak.

NOSE DROPS

Salt water nose drops and an antibiotic ointment are prescribed to keep the nose moist and open. This will prevent any crusts from forming.

KEEPING A STIFF UPPER LIP

The upper lip is important in nasal surgery, as much work is done in this area. To keep the healing tissues from being disturbed, do not move your upper lip for as long as the bandage is in place.

Avoid excessive smiling.

Avoid pursing the lips such as in kissing for ten days.

Do not pull the upper lip down as women do when applying lipstick. Apply lipstick with a brush.

The upper teeth should be cleaned with toothpaste on a face cloth. The lower teeth may be brushed as usual.

Avoid gum or foods that are hard to chew. Soups, mashed potatoes, stewed chicken, hamburger steak, or any easily chewed food is permissible.

After the first few days, if you have chosen to continue wearing a moustache dressing because of the excessive mucous drainage, do not change it more than twice daily. Changing the dressing has a tendency to move the upper lip and the base of the nose. The fact that these dressings have become soiled does not hurt anything except, perhaps, one's sensibilities. You should be able to put up with this for a few days in a good cause. Incidentally, if the dressing becomes stuck, it may be loosened with a few drops of peroxide, however do not use peroxide in the inside of the nose. Also, the best type of adhesive tape to use is Micropore paper tape, because it is less irritating to the skin. It is readily available in most drug stores.

CLEANING THE NOSE

Don't blow the nose at all for ten days. After that, blow through both sides at once. Do not compress one side.

You may clean the outside of the nose and the upper lip with cotton tipped applicators (Q-tips) moistened with warm water. You can do this as soon as you return from the hospital, but do not rub the nose very hard.

After the packing is removed, which is usually on the first postoperative day, the outside and near inside of the nostrils may need to be cleaned with a Q-tip moistened with warm water or saline solution if crusting is present. One of the antibiotic ointments that you will be given, usually Bacitracin, should be applied to the inside of the nose with a Q-tip. Twist the Q-tip around inside gently; you can go in about an inch or until you feel any resistance. This will help prevent crusting and help you to breathe better. This should be done at least 3 to 4 times a day. You were also given a saline spray. Lie on the bed, hang your head over the side, and drop in 6-10 drops in each side. Do this before you put the ointment in 3 to 4 times a day.

Soon after the bandage has been removed, the skin on the nose should be cleaned gently in your usual manner twice a day, to remove the oily material that is produced by the skin glands. This will also assist in the reduction of swelling.

DRYNESS OF THE LIPS

If your lips become dry from breathing through your mouth, coat them with Vaseline or lipstick. A vaporizer with plain water by the bedside at night might be a helpful addition.

TEMPERATURE

Generally, the body temperature does not rise much above 100 degrees following nasal surgery. This rise usually occurs if the patient becomes slightly dehydrated because he does not drink enough water. Take your temperature either rectally or in the armpit. The rectal temperature is one degree above the oral temperature, and the armpit temperature is one degree below the oral temperature. Report any persistent temperature above 100 degrees.

WEAKNESS

It is not unusual for a person who has had an anesthetic or any type of operation to feel weak, have palpitations, break out in "cold sweats", or get dizzy. This gradually clears up in a few days without medication.

MEDICATION

Our office will usually give you all of your prescriptions the day before or the day of your surgery. Almost all patients will be given an antibiotic to be taken after surgery. Obtain explicit instructions about this medicine from the nurse. Multivitamins with vitamin C are suggested for the pre- and postoperative periods, and can be obtained by you without a prescription.

We strongly discourage you from taking any Vitamin E preparations prior to or after surgery. These may increase the probability of bleeding. If you develop a rash or other reaction while you are taking one of the medicines, this could mean that you are developing an allergy to the medicine. If this occurs, please stop taking your medications and call the office immediately.

YOUR FIRST POSTOPERATIVE OFFICE VISIT

The appointment for your first postop visit should be made prior to surgery. This appointment will most probably be for the day after surgery, particularly if your surgery was performed on an outpatient basis. It is generally on the first postoperative day that the minimal nasal packing that was placed is removed. It is normal to have a small amount of bloody oozing after this. It is important that you try to eat or drink something before coming into the office the day after surgery. Ideally, this should be high in calories and protein, such as milk and cookies. If you don't feel up to this, at least a soft drink with high sugar content is advisable.

POSTOPERATIVE CARE

Following your surgery, we will want to see you in the office at regularly scheduled intervals to monitor your progress.

RESUMING ACTIVITIES

The head of your bed will no longer need to be elevated after the splint has been removed.

While the bandage is in place, don't wear any pull over clothing.

NO STRENUOUS ATHLETIC ACTIVITY FOR ONE MONTH, including swimming, jogging, aerobics, etc. No diving or water skiing for two months. No contact sports for four months.

Avoid sneezing until the bandage is removed. If you must sneeze, let it come out like a cough - through the mouth. If it becomes a real problem, we will prescribe medication to alleviate the condition.

Eyeglasses may be worn as long as the metal splint remains on the nose. After the splint is removed, glasses must be suspended from the forehead for a period of about six weeks. If this is not done, the pressure of your glasses may change the contour of your nose. Your glasses can be suspended from the nose after your splint is removed in three ways. One way is to use a piece of tape to hold the glasses on your forehead so that the weight is off your nose. Another alternative is a "noseguard". You can also have prescription lenses made for special frames that fit comfortably around your head. This is the most costly option, and involves seeing an optometrist. We can provide you with further information about any of these alternatives, and our nurses will be happy to discuss these with you to help you choose the option that best fits your needs.

Contact lenses may be worn the day after surgery.

RETURNING TO WORK OR SCHOOL

The average patient is able to return to school the day after the bandage is removed. That will be about five to six days after your surgery. Some hardy souls have returned earlier.

Returning to work depends on several factors: the amount of physical activity involved in your position, the amount of public contact your job requires, and the amount of swelling and discoloration that you may develop. On the average, you may return to work on the 8th to 10th postoperative day.

INJURY TO THE NOSE

Some individuals sustain accidents during the early postoperative period. You need not be too concerned unless the blow is hard enough to cause significant bleeding, swelling or pain. If a blow is sustained while the metal splint is still on, this should help protect the nose. However, for the first five weeks after the nasal splint is removed, more attention should be paid to any injury to the nose. Blows to the nose can cause the nasal bones to become deviated. Please report any accident to the office immediately if you feel it was a significant bump. Otherwise, let us know about it at your next visit.

FINALLY

Remember the things you were told before your operation:

When the bandage is first removed, your nose will appear fat and turned up too much. This is caused by the operative swelling over the nose and in the upper lip. The swelling will subside to a great extent during the next week. However, remember that it will take up to one or two years for all the swelling to disappear and for your nose to reach its final contour. The discoloration will gradually disappear over a period of seven to ten days, in most cases. The thicker and oilier the skin, the longer it takes for the swelling to subside.

The upper lip may seem stiff for some time after surgery, and you may feel that this interferes with your smile. Be patient. This will disappear within a few weeks.

The tip of the nose sometimes feels numb after nasal surgery. This will eventually disappear. Occasionally, the upper teeth will have tingling if extensive septal work was necessary. This, too, will resolve with time.

If you have any questions, please call us at (804) 378-7443. We are always happy to answer your questions, and if you should have a problem, this number is answered 24 hours a day.