

#BeBetterNow

Otoplasty

The Purpose of this Guide

Thank you for choosing Dorner Plastic Surgery. We strive to provide you with the highest level of caring, compassionate service during your pre and postoperative process.

It is normal to feel apprehensive and nervous before your surgery. This guide is designed to provide you with the information necessary to help ease you through the process. Although it is impossible to cover every aspect of your preoperative planning or postoperative recovery, we have attempted to make it as comprehensive as possible without being a medical text.

It is important for you to take the time to review the information presented in this booklet. As you read, questions will inevitably arise. Please write them down so that you can ask Dr. Dorner. It is preferable to have your questions answered before surgery. Dr. Dorner takes special care to make himself available to prepare you for surgery. Do not hesitate to ask him. Your entire surgical process will be smoother if your questions are dealt with before surgery.

It is a privilege for us to take care of you. We endeavor to guide you through every aspect of your surgery and meet both your physical and emotional needs during your recovery. We promise that when you need us, Dr. Dorner and the rest of his staff will be there for you.

Pre-Procedure Instructions

Photographs

Preoperative and postoperative photographs are part of your medical record. These assist the doctor in studying and evaluating your case prior to surgery and documenting your progress after surgery.

Physical Examination

A physical exam is required before all operative procedures. You will either have your preoperative evaluation performed in the office, at your family physician's office, or through the preadmission testing centers at the hospital. Most patients will have their history and physical performed in the office and laboratory performed the day of surgery.

Pets

If you have pets that jump up on you, please be sure to separate yourself from them for the first several days or few weeks.

Diet

Good nutrition is very important for your recovery. In a recent nationwide study of surgical patients, good nutrition was shown to have a beneficial effect on the body's healing process. We strongly recommend that our patients follow a sound nutritional diet. Avoid high salt foods, MSG, and tuna fish postoperatively until your swelling has subsided. Vitamin supplements are important for proper healing. We recommend a multivitamin with zinc and 1000 mg of vitamin C once a day

for at least two weeks before and after your surgery.

Seven to Ten Days Before Surgery

- Make sure both pre and postoperative prescriptions are filled.
- Maintain a balanced diet and drink water regularly.
- No alcohol intake (including wine) for one week prior to surgery.
- No dental work, including teeth cleaning (excluding routine brushing), within one week prior to surgery.
- Shop for regular household items and any extras you may need for your recovery.
- All piercings should be replaced with plastic substitutes for surgery.
- Arrange to have acrylic or gel nails removed (at least each index finger for monitoring equipment).

Two days before your surgery

• Start taking your antihistamine medications (Claritin 10 mg once a day and Zantac 150 mg twice a day). These will help reduce your swelling after surgery.

Day Before Surgery

- Do not eat anything solid for 6 hours before surgery. You may drink Gatorade or Apple juice up to 2 hours before surgery.
- Remove nail polish.
- Do not eat or drink anything after midnight the night before your surgery if you are having sedation.
- Set out clothing that is loose and buttons or zips up the front. A warm-up or jogging suit is
 ideal.
- Wear flat soled shoes that are comfortable and easy to wear and remove.
- Do not wear make-up.
- Do not wear jewelry, earrings, rings, hairpins, watches, or false eyelashes. Remove all piercings and replace with plastic substitutes.
- Please leave valuables at home. Do not bring more than twenty dollars with you.
- Continue taking your antihistamine medications (Claritin and Zantac). These will help reduce your swelling after surgery.

Morning of Surgery

- Do not eat anything solid for 6 hours before surgery. You may drink Gatorade or Apple juice up to 2 hours before surgery.
- Take the following medications before arriving at the surgery center:
 - Tylenol 1000 mg (Two extra strength.)
 - Claritin 10 mg
 - o Zantac 150 mg
 - Meloxicam 15 mg (Prescription medication.)
 - Neurontin 600 mg (Prescription medication. Two 300 mg tablets.)

- Apply your clonidine patch 0.1 mg. Be sure to place it outside of your surgical area.
 If you have questions on placement, simply bring to the surgery center and one of the nurses will help determine where to place it.
- Please refer to the medication precautions sections to see which medications you should be taking the morning of surgery. You may take these medications with a small sip of water.
- Bring your prescription medications with you.
- You may shower and wash your hair, but do not set or spray it. Do not use facial moisturizer or makeup. Men may shave and use aftershave lotion.
- Brush your teeth with minimal water and use mouthwash.
- Wear comfortable button down or zipper tops that can be worn home. Avoid clothing that must be pulled on over your head.
- Women must not be pregnant at the time of surgery. If there is any doubt, then a pregnancy test should be performed.

Medication Precautions

Medications to be taken the morning of surgery with a sip of water

- All heart medications
- All blood pressure medications except diuretics (water pills), ACE inhibitors, or Aldosterone antagonists (Inspra & Aldactone)
- All breathing medications, including inhalers
- All anti-seizure medications
- All heartburn and gastric reflux medications (except antacids such as Maalox, Mylanta, Tums, etc.)
- Steroid medication
- Antidepressant medications (except monamine oxidase inhibitors—see next page)

Medications not to be taken the morning of surgery unless otherwise directed

- Insulin or oral diabetes medications
- Diuretics (water pills)
- ACE inhibitors for blood pressure (end in "pril"; e.g. captopril, enalapril, etc.)
- Aldosterone antagonists (Inspra & Aldactone)
- Digoxin unless used for irregular heartbeat (atrial fibrillation)

Medications to be stopped greater than one day before surgery

- Glucophage (metformin) should be stopped one day before surgery.
- Lovenox should be stopped two days before surgery.
- Trental should be stopped three days before surgery.
- Aspirin (or aspirin-like products, see list next page), Plavix, Pletal and Ticlid should be stopped seven days before surgery. These medications increase the risk of bleeding and bruising and should not be restarted for one week postoperative.
- All herbal medication should be stopped two weeks before surgery.
- Monamine oxidase inhibitors should be stopped two weeks before surgery.

Surgical Facilities

Outpatient surgery is performed at Bradenton Surgical Center at 4930 Bradenton Avenue, Dublin, OH 43017. We can be reached at 614-336-9000.

We do offer an overnight stay for an additional fee. Please let staff know ahead of time if this interests you.

Post Procedure Instructions

First Three Days Following Surgery

Physical Activities

It is normal to feel tired, sedated, or woozy for a day or two after surgery, particularly if you are taking pain medication. However, you should be your usual self. If you are not acting normal (hallucinations, excessively sleepy or unresponsive, one sided weakness, etc.) please contact our office immediately as this could be a sign of something more serious.

It is okay to take the following over-the-counter medications: plain Benadryl, Pepcid, Prilosec, plain Claritin (not Claritin-D), and laxatives. Please contact our office if you are considering any other medications.

Do not exert yourself the first few days after surgery as this will increase swelling and bruising. Elevate your operative area and avoid lifting as much as possible. Do not lift more than 20 lbs for the first 2-3 days. It is preferable that you slowly begin to resume your normal activities and progress a bit each day. Listen to your body. If you feel tired or sore when performing an activity, slow down or stop. Slowly and gradually increase your level of activity as you feel stronger.

Remember that smoking and drinking alcohol (particularly red wine) will appreciably increase swelling and bruising and will have a negative effect on your mood. It should be avoided for one week after surgery.

If you stand up quickly you may feel light-headed. This is not unusual. It is best to have someone assist you until this feeling subsides which is generally within one or two days. To reduce this sensation, sit at the side of the bed for a few moments (at least a count of ten) until you gain your bearings, then stand up very slowly.

If you must climb stairs, take one step at a time. Face the railing or banister and hold on with both hands. An assistant should walk behind you as you go up the stairs and in front of you as you come down. If you feel dizzy, sit down immediately and wait for the feeling to pass.

Never walk alone if you feel light-headed. Ask for assistance. Don't forget to keep a night light and a chair in both your bedroom and bathroom.

Sleep

Prop your back up on two pillows or sleep in a recliner to keep your head elevated and reduce swelling for the first three days after surgery. Place pillows on either side of your head to help prevent you from accidentally turning your head while sleeping.

Headband

Your postoperative dressing can be removed after forty-eight hours. After this time, you will need to wear a headband (snug, not tight) at all times for the next two weeks. This is to prevent any accidental folding of the ears forward during the healing process. You may remove it only for bathing. Once two weeks have passed, you need only wear it at night or while playing sports. At six weeks postoperatively you may discontinue wearing the headband.

Diet

Eat a low salt diet as excess salt can increase swelling. Drink plenty of juice to prevent dehydration

and decrease constipation. Avoid salt, caffeine, spices, or excessively fatty foods.

Pain Medications

Take pain medication as soon as you begin to feel discomfort. Waiting for the pain to become more intense is not helpful and may be harmful. Keeping ahead of the pain curve helps your body heal by decreasing your stress response. Don't wait until it becomes stronger and more bothersome.

While you are on pain medication, you should refrain from driving.

Do not drink alcohol while taking pain medications.

Some patients experience stomach irritation and nausea when taking pain medication and antibiotics. To help avoid this, take your medication with a small amount of food such as toast, crackers or a banana. If you continue to have problems with nausea, please contact our office. Changing the type of pain medication or antibiotic may relieve the nausea and an anti-nausea pill can be prescribed.

Suture Care

It is recommended to wash incisions gently with chlorohexidine soap and water. Pat the incision dry. This helps keep them clean and reduces the chances of infection. If there are small crusts on the incision, dab them with hydrogen peroxide. This will help remove the crusts and will make suture removal easier.

Apply polysporin behind each ear three times a day. This keeps the sutures soft and helps them dissolve.

A Word About Intimacy

Shortly after surgery, many patients desire closeness and intimacy. Patients should not resume sexual activity until two full weeks postoperative due to elevation of blood pressure and potential bleeding complications.

Two Weeks After Surgery

It is still too early to judge the results of surgery. Although most of the bruising has begun to resolve, you will still notice post-surgical changes. Residual swelling and changes to nerves that accompany surgery will be responsible for altered sensations. Over time this will subside.

Appropriate follow-up visits will be arranged and most questions can be answered by the Patient Coordinator or doctor with a telephone call.

Surgical Refinement

Although unusual, some patients may require a "touch-up" procedure. There is generally a charge for most revisions. This may include a surgeon's fee, facility fee, and/or an anesthesia fee. For minor revisions, our office may absorb the cost as a courtesy to our patients.

If the revision surgery is related to aging, health abnormalities, lifestyle, or is after one year, a full surgeon's fee, surgical facility fee, and anesthesia fee should be expected.

Common Medications

Preoperative Medications

These medications reduce swelling after surgery. They should be started two days before your procedure and continued for a total of seven days. They can be taken the morning of your surgery with a sip of water.

- Claritin 10 mg tablets once a day
- Zantac 150 mg tablets twice a day.

These medications help reduce your pain and nausea after surgery. Please take them before arriving at

the surgery center with a sip of water.

- Tylenol 1000 mg (Two extra strength.)
- Meloxicam 15 mg (Prescription medication.)
- Neurontin 600 mg (Prescription medication. Two 300 mg tablets.

This medication helps reduce the risk of bleeding. It is a patch and should be placed on the skin outside the surgical area. It helps reduce blood pressure fluctuations. If you are light headed after surgery, especially while standing up, remove this medication. If the feeling persists, please contact our office.

• Clonidine 0.1 mg transdermal patch (Prescription medication.)

Pain Medications

These medications may cause nausea and constipation. Please take them with crackers or other light food and use a stool softener. Please do not drive while taking these medications.

These medications include Norco (hydrocodone and acetaminophen) and Percocet (oxycodone and acetaminophen). The usual dose for these medications is one or two tablets as needed for pain every four hours.

Be sure to pick these medicines up after your preoperative appointment. After three days the prescriptions expire and will have to be resent.

Nerve Medications

Neurontin is prescribed to help reduce your need for narcotic medications. This medicine should be taken twice daily.

Anti-Nausea

Zofran (ondansetron) is an anti-nausea medication. It can be taken every four hours and dissolves directly under the tongue. Do not swallow as it will take longer to be effective. You can take two at a time if needed.

Antibiotics

Antibiotics are prescribed for some in office procedures. They are not recommended for most surgeries as they contribute to antibiotic resistance. You will have received antibiotics at the time of your surgery. However, if you have been prescribed an antibiotic, be sure to take them until finished.

Keflex is a cephalosporin antibiotic. Do not take this medication if you have an allergy to penicillin. Please contact our office if this is the case. Clindamycin is used for patients with a penicillin allergy.

Problem Signs

Although rare, problems may occur after surgery. Being proactive and addressing concerns early reduces healing time and improves outcomes. A stitch in time saves nine! If you are concerned about anything regarding your surgery, please contact our office immediately. Some common concerns are addressed below.

Pain

Everyone has some degree of pain after surgery. With medications, the pain should be tolerable. If you are having pain that is not controlled, please contact our office. Most pain will resolve as the healing process continues. If pain continues for greater than six weeks, you will be referred to a pain specialist and no further narcotic medications will be prescribed.

Infection

Signs of infection include increasing pain, swelling, redness, odor, temperature above 101 degrees, and drainage from your incision. If you see any of these signs, please contact our office.

Bleeding

Bleeding is very rare. Signs of abnormal bleeding include significant swelling, light headedness, racing heartbeat, or excessive fatigue. Please call the office or go to the local emergency room if you are concerned about bleeding.

Blood clots

Blood clots can occur after surgery in the legs. This is an exceedingly rare complication, but can be severe. If you develop significant pain or swelling in the calves, it needs to be addressed immediately. You should go directly to the emergency room where a scan can be performed to see if one has formed. If you have any immediate onset of chest pain and shortness of breath, you should call 911 immediately.

Emergency Contacts

Doctor Dorner is available twenty-four hours a day. If you are having problems please call the office at 614-336-9000 and press one to have him paged. Be sure to leave your contact information.

For any life-threatening emergencies, you should call 911.

Notes: