

#BeBetterNow

# Nasal Surgery

## 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

### General Preoperative Guidelines

Try to avoid becoming run-down. Organize your time, eat well, and get sufficient sleep. Avoid sunbathing or tanning booths.

### Assistance After Surgery

You must have an adult present to assist you for the first twenty-four hours after surgery. This includes driving you from the hospital. You will not be able to take a taxi as they will not be able to help you into your house or give you further assistance if needed. If you are unable to find a suitable assistant, our office can help make arrangements for an overnight stay at a recovery suite or with a professional medical assistant.

### 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. This is particularly important for patients undergoing abdominal surgery. Remember to have a sufficient supply of pet care items and food available during your recovery.

## 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.

## Weight Changes

Any weight loss should be achieved prior to surgery. No dietary programs should be followed during the week prior to your operation and a normal, high-protein, nutritious diet should be consumed a week prior to your operative procedure. Most patients find they may gain a few pounds after an operation. This is due to fluid intake and swelling. This usually resolves and stabilizes after a period of two to four weeks.

## Your Comfort Station at Home

A little preparation and organization of your home before surgery will help you feel safer, more comfortable, and happier during your recovery. The following suggested purchases may be helpful to you, depending upon the type of surgery being performed.

### From the pharmacy

- Throat lozenges or cough drops for dry throat
- Chapstick or lip balm (Carmex) for dry lips
- Mouth spray or breath mints
- Skin body moisturizer
- Ultrasonic humidifier
- Saline nasal spray
- Tums or Maalox
- Tylenol
- Milk of Magnesia (Pain medications may cause constipation)

### For your bedroom or recovery area

- Bedside table or night stand
- Warm socks or booties
- Night Light
- Small bib (to protect clothing when eating in bed)
- Paper towels
- Kleenex
- Trash bags (at bedside)
- Baby wipes (for quick clean-ups)
- Pencils, pens, and paper

- Towels
- Older sheets (softer, less likely to cause creases or irritation of the skin)
- Remove anything that might trip you
- Place your phone near your bed
- Keep emergency phone numbers handy (doctor, pharmacy, etc.)
- Place a chair in your bedroom and bathroom in the event you become lightheaded so you will be able to sit down.
- Food and drink supply
- Yogurt, baby food, apple sauce
- Frozen dessert bars
- Fresh fruit, pineapple, papaya
- Bottled spring water, juices

## 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.
- Arrange for transportation to and from office visits for the first week.
- Arrange for child care, pet care, and mail pickup.
- Refer to the “Comfort Station” in this material. 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.
- 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 to the hospital or surgery center.

- If you wear contact lenses, eyeglasses, or dentures, bring your cases with you. Be sure your name is on the outside.
- If you are going to be staying overnight in the hospital, please bring a change of clothes for the ride home.
- 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
  - 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

Outpatient surgery will be performed at either Memorial Outpatient Surgical Center (MOSC) or Knightsbridge Surgery Center. Both centers are accredited outpatient surgical facilities. Please arrive one hour before your scheduled surgery.

In-patient surgery is generally performed at Dublin Methodist Hospital which is right across the street from Dr. Dorner’s office. If you are having surgery in the hospital, please arrive 2 hours before your scheduled 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

During the first day or two following surgery with general anesthesia, it is important to take deep breaths throughout the day. This helps exercise and clear your lungs.

Changing positions in bed or while lying on your couch is important to decrease back discomfort. Move your legs from side to side and up and down, and flex your ankles intermittently. These activities will improve your circulation and decrease stiffness.

Be sure to take brief walks around the room or house three times a day. This helps prevent blood clots.

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. 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 a minimum of two weeks.

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.

## Elevation

Keep your head elevated. Prop your head up on at least two pillows at night or sleep in a recliner. This should be continued for about one week.

## Contact Lenses

It is recommended that you avoid contact use for the first few days after any surgery.

## Diet

It is normal for your appetite to be diminished for the first few days following surgery, but fluids are important. Eat a low salt diet as excess salt can increase swelling. Drink plenty of juice to prevent dehydration and decrease constipation. As your appetite increases, start with easily digested foods. Avoid salt, caffeine, spices, or excessively fatty foods.

You may find that you need to make frequent trips to the bathroom. This is normal and is a result of the fluids provided during your surgery.

## Drainage

A moderate amount of bleeding or a bloody discharge may be present for several days. The gauze sling under the nostril should be changed as necessary until the discharge stops but do not blow your nose. Call if you think bleeding is excessive.

## Packing

If you have packing in your nostrils, this will be removed on postoperative day two or three. Take your pain medication before coming to the office as some patients experience slight discomfort with its removal.

## Cold Compresses

For the first forty-eight hours, please apply cold ice packs to the eyes only. This helps reduce swelling. Use a separate ice pack for each eye so that there is no pressure on the nose. Do not apply ice directly to the skin; instead place a wet gauze or washcloth between the ice packs and skin.

## Warm Compresses

After forty-eight hours, you may switch to warm compresses. Apply them to the eyes for ten minutes at a time, four to six times a day until bruising resolves. You may use gauze sponges, a wash cloth, or hand towel rung out with warm water only. Do not use hot water. Never use an external source of heat such as a heat pack or other commercial heating pad. You can burn the skin if the compress is too warm.

## Grooming

You may shampoo gently after the second day. Avoid hot water or the high heat setting on the blow dryer. Keep the nasal bandages and splint dry.

## Splint

Do not remove the nasal splint. This will be removed in the office after one week.

## Glasses

Do not wear glasses until four weeks post-operatively. If necessary, you may tape them to your forehead to keep the pressure off the nose.

## Medication

If you are taking antibiotics you should eat yogurt, drink acidophilus milk, or take lactobacillus capsules daily to decrease the possibility of a yeast infection. Although rare, if you notice a genital rash, vaginal itching, or whitish vaginal discharge, call our office and you will be provided a prescription for an antifungal. If antibiotics are prescribed, take

them regularly and continue until they are gone.

Unless instructed otherwise, continue with your regular prescriptions such as blood pressure, birth control, and thyroid medications. See the section on medications for more information.

## 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.

If you are taking several medications, you might find it helpful to place colored tape around the pill containers or mark them with sticky colored dots (available at any stationery store) for identification. We recommend:

Red (or the letter "P") for PAIN PILLS.

Blue (or the letter "A") for ANTIBIOTICS.

Yellow (or the letter "S") for SLEEP.

Green (or the letter "N") for ANTI-NAUSEA.

Please notify the office as soon as possible if your medication is getting low. Medication refills may take up to 24 hours to fill from the time that the office is notified. Also, refills cannot be completed on weekends. 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.

## Suture Care

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.

Absorbable sutures (beige in color) can be covered with antimicrobial ointment. Keeping them moist helps them dissolve and keeps them soft.

## The Blues

It is not unusual for a patient to develop a case of "the blues" several days after cosmetic surgery. Almost everyone experiences symptoms of mild depression or anxiety during recovery, usually about five days postoperative. You may find yourself short tempered or withdrawn, lashing out at family or friends, or crying.

You can get through this blue period by reminding yourself that what you are going through is normal. Above all, don't fret about this process. It is self-limiting and will resolve itself.

## 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.

You will be able to appreciate the improvement in your appearance by now. Scars will still be healing and you will be aware of numbness, but you will start to be less self-conscious about the operation and more concerned about work and your social routine.

## 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. Please notify the office as soon as possible if your medication is getting low. Medication refills may take up to 24 hours to fill from the time that the office is notified. Also, refills cannot be completed on weekends. 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.

### Medication Refills

Please notify the office as soon as possible if your medication is getting low. Medication refills may take up to 24 hours to fill from the time that the office is notified. Also, refills cannot be completed on weekends.

### 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.

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Notes: