

RHINOPLASTY: NOSE SURGERY
MEMORIZE THIS PAPER PRIOR TO SURGERY

WHAT TO EXPECT FROM NASAL SURGERY

No other aesthetic surgical procedure today has achieved wider acceptance than rhinoplasty, the reshaping of the nose. It is an especially satisfying procedure that can be performed at any time after the middle teenage years. Desire and health, not age, are the determining factors.

The degree of improvement possible is limited by the individual's basic nasal skeleton and skin thickness, but wide noses can be narrowed, noses with a hump can be reduced, drooping noses lifted, bulbous tips reduced, and wide nostrils can be narrowed. The objective is to create a nose which is in harmony with your other facial features and has a natural appearance.

Rhinoplasty for cosmetic reasons, or to correct deformities from injuries, is frequently performed in combination with internal nasal surgical procedures to correct breathing problems. If this is the case, medical insurance may cover a portion of the surgical fee.

Nasal surgery can be performed at the same time as a facelift, eyelid surgery, chin augmentation, or other cosmetic surgery procedures.

THE PREOPERATIVE VISIT

The visit will be scheduled approximately two weeks before surgery. It will give you an opportunity to ask questions you might not have previously asked. We will review your medical history, give you a preoperative examination, and discuss what to expect during surgery. If you are over forty years of age or have a history of heart abnormalities, we will arrange for an electrocardiogram. We will also take preoperative photographs, which become a permanent part of your medical record and remain strictly confidential. Your operative consent will be read and signed, preoperative instructions reviewed, and prescriptions for the medications you will need will be given to you at this visit. Your fee will be due at this time.

Arrangements to facilitate overnight or postoperative care will be made to your individual needs.

WHAT TO EXPECT DURING SURGERY

Nasal surgery is usually performed at the Highland Park Plastic Surgery Center on an outpatient basis under general or twilight sleep sedation anesthesia. A board-certified anesthesiologist or anesthesiologist will be present to make you comfortable and unaware throughout the procedure.

Dr. Toledo will talk with you just prior to the surgery to be sure there are no last minute changes. Before surgery begins, you will be asked to change into a surgical gown and will be taken into a private operating room. An intravenous line will be inserted into a vein in your arm. This will make it possible for the anesthesia provider to administer

fluids and to deliver the necessary medications to make you comfortable. Monitoring devices will be connected to you to assure your safety.

Your face and neck will be washed with an antiseptic solution. The incisions are made inside the nose, and sometimes at the junction of the nose and upper lip. This means that most scars remain hidden. Specialized instruments are used to reposition nasal bones, allowing them to be moved and narrowed, reshaping the nasal structure. The tip of the nose can be shortened or raised, usually by removing an appropriate amount of cartilage. It can also be reduced in size. In some instances, an implant or cartilage from another part of the body can be added to obtain the final shape of the nose.

Patients with unusually large nostrils can have them reduced in size by making a small incision at the base of each nostril. A small wedge of skin is removed and the incision is closed with tiny sutures. These incisions are usually difficult to detect.

Most patients have splints placed inside and outside the nose to provide support and protection.

Rhinoplasty generally takes an hour and a half to two hours. If performed in conjunction with other procedures, surgery will naturally take longer.

WHAT HAPPENS AFTER SURGERY

You will be transferred to a recovery room adjacent to the surgical suite, where you will be continuously monitored as you recuperate from the effects of the surgery and anesthetic. You will be allowed to go home after a recovery period of one to two hours, or transferred by our nurses to the adjacent facility for a planned overnight stay. You should feel fine, although it is not unusual to expect some minor discomfort.

You will have a metal cast on your nose which you will wear for approximately five to seven days. You may also have splints inside of your nose.

You must arrange for a responsible person to spend the first night and the next day with you. We will give them instructions for care before you leave. Have them read this paper prior to your surgery. This is absolutely necessary as you will not be able to care for yourself immediately following surgery.

Because everyone is different, it is impossible to write postoperative instructions that apply equally to everyone. For example, some patients can have sedation vs. general anesthesia or outpatient vs. inpatient surgery. Some patients have only a single procedure and others may have multiple surgeries in a single setting. Use these instructions as a general guideline, but don't panic if we vary on some issues.

NOTE: If you live out of town, you must make arrangements to stay within a thirty-minute drive of the center for the first twenty-four hours after surgery.

WHAT YOU WILL SEE IN THE MIRROR

Bruising around the eyes is to be expected after nasal surgery but begins to fade within a few days. It disappears completely within a few weeks.

When the external splints are removed, your nose will still be slightly swollen, although it usually looks good at two weeks. Final settling, shaping, and improvement may take six months to a year.

For most of our patients, the results of a rhinoplasty are extremely satisfying.

Preoperative Guidelines

Cleanser: Bathe your entire body with Hibiclens the night before surgery and again the morning of surgery. Hibiclens is an anti-bacterial, antiseptic liquid soap. Sleep on clean sheets the night before surgery and wear clean clothes to your surgery.

Medications: Do not take aspirin or ibuprofen for three weeks before or two weeks after surgery. Please inform us of any and all medications you take including prescriptions, over the counter, vitamins, herbal or natural medicines, and supplements. **Hormone replacement therapy and birth control pills increase the incidence of blood clots. STOP 2 WEEKS BEFORE AND AFTER SURGERY.**

Smoking: Smoking or nicotine use (chewing tobacco, nicotine gum, snuff) can have a severe detrimental effect on wound healing. The nicotine decreases the vital blood supply to the skin and can cause poor healing or even skin death. **STOP ALL NICOTINE PRODUCTS 2 MONTHS BEFORE AND AFTER SURGERY.**

Caffeine- Excessive use of products with caffeine such as coffee, tea, or soft drinks, especially Diet Coke, can have similar effects as nicotine. **STOP ALL CAFFEINE PRODUCTS 2 WEEKS BEFORE AND AFTER SURGERY.**

POSTOPERATIVE GUIDELINES

You should expect:

- Moderate swelling, bruising, bloodshot eyes which lasts for one or two weeks.
- Stiffness. Breathing improves over several months.
- Bleeding from the nose for about 24 hours. You will have a gauze drip pad under your nose which may become saturated. Don't be concerned. Change it as frequently as necessary, and leave it on usually for one day.

Call (214) 363 – 4444 if you have:

- Severe pain which does not respond to medication.
- Prolonged or profuse bleeding. In the meantime, sit up: Do not lie flat because it will cause more bleeding.
- Redness, warmth, or rash-like formation on the skin.
- Excessive bleeding or drainage in the drain (more than 25cc/hour).
- Deep pain in the legs/calves; which may indicate a blood clot.
- Shortness of breath or labored breathing can be a sign of blood clots in your lungs.
- Any other problems or questions not addressed on this paper.

Medications: Take the medications we've prescribed according to the instructions printed on the bottle. You may feel a little drowsy, so have someone help you. If you need a refill, call the office and give us the phone number of your drugstore or pharmacy. Do not take aspirin or ibuprofen for three weeks before or two weeks after surgery.

You cannot use any nasal steroid sprays such as Flonase, Nasacort, Rhinocort, Nasonex and others before or after surgery. Nasal steroids are used to treat allergic rhinitis but will inhibit healing and can cause serious permanent complications.

Activity/Sports/Work: You should take it easy the day of your operation and the following days. By keeping your head elevated above your heart, swelling can be minimized. Because of your medications, you may need assistance getting to and from the bathroom for the first day. You may drive a few days after surgery, but never under the influence of pain medication. Strenuous sports such as tennis, swimming, jogging, aerobics, or bicycling may be resumed after three weeks. This includes hot tubbing, sexual relations, and brisk walking. It is imperative that you prevent any injury to the nose during the postoperative period for four weeks. Depending on the kind of work you do, you may return to your job as soon as you feel comfortable. The splint and tape will remain in place for approximately one week. Do not remove it. If it accidentally falls off, don't panic; your nose may just swell a little more than usual.

Pain: Most patients feel that the discomfort from this surgery is minimal. The typical complaint is feeling the nose is "stuffy" or "congested". The greatest period of discomfort lasts about 24-48 hours. Thereafter, you should have less discomfort and less need for medication. Occasionally, it lasts a little longer, as different people have different pain tolerances.

Ice packs: Our staff will explain how to make simple, effective ice packs which should be placed on your eyes for two days following surgery. This will decrease discomfort, swelling, and bruising.

Cleaning the inside of your nose: Do not blow your nose for two weeks after surgery. You can start gently cleansing the inside of your nostrils with a Q-tip moistened with hydrogen peroxide the day after surgery. You may place the Q-tip up to 1/4" inside the nostril without causing any damage. Follow with a thin layer of Polysporin ointment to keep the nostril and suture lines from becoming infected and maintaining lubrication.

Postoperative visits: The day after surgery: you will be called at home by our staff. You will be more comfortable using our private post-operative waiting room for your initial post-operative visits. Park in the handicap spot in front of the Sherry Lane door. Ring the doorbell and we'll open the door from the inside.

Day 5 to 6- The patient returns to the Highland Park Plastic Surgery Center to have the cast and outside sutures removed. If splints were used to stabilize the

septum, those may be removed during this visit. Even with the swelling, the patient should have a good idea of what their nose will look like.

One Month- If you live close to the DFW metroplex, Dr. Toledo would like to examine the nose to make sure the patient is healing as expected. Out of state patients can email photographs to help us evaluate their postoperative results.

3-6 Months- At this visit most patients will have their postoperative photos taken. If there is still a small amount of swelling, postoperative photos would be taken a few months later.

Annually- Dr. Toledo recommends seeing patients — at no charge—every year (or as able) to follow the results of their surgery. This allows Dr. Toledo and his staff to better evaluate patient outcomes and continue to refine techniques in the future.

Diet/Alcohol: Start with liquids the first few hours and then progress to your regular diet as you desire. Do not drink alcohol for five days after surgery, or when you are taking pain medication.

Hair/Makeup: You may have your hair washed 24 hours after surgery. However, someone should wash it for you so you can lean back with your face up. Do not bend your head forward. You will have to bathe or shower very carefully to prevent getting the external splint wet. You may wear makeup anytime after surgery, providing it doesn't interfere with the splints or tape.

Sneezing: Remember to open your mouth, so that air can be expelled from your mouth, not your nose.

Sun: Do not sit in the sun at all for one week after surgery. After that time, apply sunscreen to the nose.

You will feel more comfortable using the private postoperative waiting room for your initial postoperative visits. Park in the handicap spot in front of the Sherry Lane door. Press the doorbell and we will let you in from the inside.

Please feel free to call us at anytime during your healing period. **THE OUTCOME OF YOUR SURGERY IS IN YOUR HANDS AS WELL AS THE DOCTOR'S. IT IS YOUR RESPONSIBILITY TO FOLLOW THE INSTRUCTIONS GIVEN TO YOU.**

Possible Complications and Problems:

No surgical procedure is without risk. The majority of complications associated with rhinoplasty, however, are minor. Here are some possible problems:

Nasal bleeding. If this occurs, tilt the head back and apply pressure at the base of the nose between the nostrils. If bleeding persists, call the office. Nasal packing may be inserted or a small blood vessel inside the nose may have to be cauterized.

Numbness and tenderness. This may persist for months.

Depression. With aesthetic surgery, as well as with other surgical procedures, this sometimes occurs postoperatively. This is generally attributed to the normal response of the body to surgery and anesthesia.

Asymmetry. No patient is identical from side to side. Small differences exist in all patients. In the occasional patient with a major difference, it can usually be improved with a secondary procedure.

Potential but unlikely complications:

Infection. In order to reduce the risk of infection, please tell us prior to surgery if you have a cold, allergic condition, or infected pimple in the nasal area.

Poor healing of nasal tissue.

A partial block of nasal breathing on one or both sides.

Deep venous thrombosis (blood clots) affects mainly the veins in the lower leg and the thigh. This clot may interfere with circulation of the area, and it may break off and travel through the blood stream. This clot can then lodge in the brain, lungs, heart, or other area, causing severe damage to that organ or even death. This is the reasons we have you stop hormones, wear TED hose, and walk every 3 hours the night of surgery.

Complications of a severe nature, which could be life threatening.

YOU MUST ENTER INTO SURGERY FULLY UNDERSTANDING NOT ONLY THE BENEFITS BUT ALSO THE POSSIBLE PROBLEMS. OCCASIONALLY, MINOR REVISION MAY BE NECESSARY TO ENHANCE THE FINAL RESULTS, OR TO IMPROVE THE AIRWAY.

Infection Alert

There is evidence of an increased incidence of MRSA (methicillin-resistant Staphylococcus aureus) and other antibiotic resistant bacteria in our community. In the past, these resistant bacteria were typically found only in hospitals, but they are now found everywhere. Frequently people can be a carrier of the bacteria without their knowledge. An infection with this bacteria can cause severe damage to the skin and even death. We are diligent in cleaning and sterilizing our facility and try to limit the exposure of outside bacteria from patients into our surgery center. We therefore have implemented

the following hygiene steps to help prevent the contamination of our facility and therefore decrease your post operative infection risk.

Bathe your entire body with Hibiclens the night before surgery and again the morning of surgery. Hibiclens is an anti-bacterial, antiseptic liquid soap. Sleep on clean sheets the night before surgery and wear clean clothes to your surgery.

The instructions above are general and some portions may not apply to all patients. Changes in the instructions depend on your medical history, number and type of procedures and type of anesthesia.