



THE NADERI CENTER

COSMETIC SURGERY SPECIALISTS

PRE-OPERATIVE INSTRUCTIONS FOR BREAST REDUCTION

3-4 WEEKS BEFORE SURGERY

- *Obtain Medical Evaluation and Clearance.* Make a visit to your primary care doctor to complete your medical evaluation and laboratory testing. Your surgeon may request for you to also be evaluated by a specialist or get a mammogram. Please ensure any preoperative requests are completed 2 weeks before surgery.
- *Work and Recovery Arrangements.* Make any arrangements to be off from work or other strenuous activities while you are recovering from surgery. Have extra help available, particularly if caring for small children.
- *Smoking.* Tobacco, cigarettes and nicotine consumption will cause poor wound healing, longer healing times, and excessive scarring. We advise discontinuing these products more than 4 weeks prior to surgery.

2 WEEKS BEFORE SURGERY

- *Surgery Preop Appointment.* You will come in for your preop appointment where you will review the surgery plan with your surgeon and go over logistical surgery details with your patient coordinator. Bring your questions as well as any individuals that will be part of your support and healing.
- *DIET/SUPPLEMENT RESTRICTIONS.* Avoid foods, drinks and herbal supplements that can increase risk of bleeding and bruising. Avoid aspirin, Ibuprofen, Naproxen, Motrin, blood thinners, vitamin E, omega-3, fish oil, and alcohol. Use Tylenol in place of other over the counter pain medications.
- *Fill Prescriptions.* These may include anti-nausea and/or pain medication for after surgery. Make sure you understand how and when to take all medications. We suggest keeping a note pad to keep track of the medications you have taken.
- *Watch the PREOP AND POST OP VIDEOS on our website:*
www.nadericenter.com

1 WEEK BEFORE SURGERY

- *Review Instructions with Caregiver.* Confirm who will be driving you to and from the surgical center and who will stay with you for at least 24 hours after surgery.

- *Arnica.* If provided, start your Arnica tablets two days before surgery. One in the AM and one in the PM and continue until the bottle is finished.

NIGHT BEFORE SURGERY

- **DO NOT EAT OR DRINK ANYTHING AFTER MIDNIGHT OR SURGERY WILL BE CANCELED.** If prescribed, take medications with a small sip of water.
- *Set Up Home Recovery Area.* This may include pillows, blankets, books, television, and anything else to assist with a comfortable recovery.
- *Bathing.* You can shower but do not apply lotion, perfume, hair product, etc.
- *Relax.* Stay calm and get plenty of rest to avoid unnecessary stress.

DAY OF SURGERY

- *Dress Comfortably.* Dress in comfortable, clean, and loose-fitting clothes. Shirts that can be buttoned or zipped up are preferred.
- *Arrival to Facility.* Arrive to the assigned facility of your procedure at the time stated in your pre-operative packet. Remember to bring a form of identification.
- Do **NOT** wear any makeup, jewelry, cosmetic creams, hair products, deodorant, sunscreen, and remove all piercings.

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| POST-OPERATIVE INSTRUCTIONS FOR BREAST REDUCTION |
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NIGHT OF SURGERY

- *Movement is Important.* Make sure to get out of bed and be up and walking around immediately after your surgery. When lying down in bed or on the couch, make sure you are moving your legs and ankles. Take deep breaths frequently to keep your lungs clear.
- *Sleep.* Sleep on your back with your head elevated about 30-40 degrees (2-3 pillows). Do not sleep on your side. Keeping your body more upright will minimize swelling. Continue this for one week.

MEDICATIONS

- *Pain.* You will be prescribed a pain medication for post-operative pain control. If your discomfort after surgery is not strong you are welcomed to take Tylenol in place of the prescribed medication. Do not take the Tylenol with the pain medication, as most often the medication you are prescribed will have Tylenol in it. **Do not exceed 4,000 mg of Tylenol in any 24-hour time period.** Take medication with food to minimize risk of nausea.

- *Nausea.* If you are experiencing nausea, which is common after general anesthesia as well as a known side effect of some stronger pain medications, we advise that you take your nausea medication. You may have been given a Scopolamine patch that is placed behind your ear. This will deliver anti-nausea medication for three days after its placement.
- *Constipation.* You will experience constipation if taking narcotic pain relievers. Miralax or other over the counter laxatives are recommended. Do not wait to take until you are constipated. Begin treatment with narcotic use.
- *Medications to Avoid.* Take only those medications approved or prescribed by your surgeon. Avoid medications containing aspirin or ibuprofen (Advil, Motrin, Ibuprofen, others) for two weeks before and after surgery. These medications may increase bleeding.
- *Substances to Avoid.* Avoid alcohol, nicotine, and caffeine, for these will dramatically slow the healing process.

NUTRITION

- *Diet.* A light low-fat diet is best after surgery. You may start a regular diet after your surgery as long as you are not feeling nauseated or vomiting.
- *Hydration.* Stay hydrated by drinking 8 -10 glasses of water a day. Avoid alcohol for 48 hours and while you are still having to take pain medications.

ACTIVITY

- *Exercise.* Normal daily activity may be resumed a few days after surgery. Exercise may be resumed 1-2 weeks after surgery. Remember to start easy and build back up to your previous exercise levels. Just know that swelling may transiently be worse with exercise.
- *Arm Movement.* Limitations are based on your pain. There are no restrictions but if it hurts, please don't do it. washing and/or drying your hair is fine.
- *Compression Bra.* Expect to wear a compression bra the entire first week, and then as wanted or suggested by Dr. Anderson thereafter. The garment should fit snug but not too tight that you have trouble breathing or you develop wounds or blisters from the compression. Wear your garment at all times except for when you are showering or to wash it. This will help with minimizing swelling and help with healing.
- *Driving.* Do NOT operate a vehicle or make important decisions until you have been off pain medications for 24 hours. Use good judgment.
- *Return to work.* Most patients require approximately 5-7days off work depending on their job responsibilities. Returning to work with a light schedule initially or even part-time can be beneficial as well.

- *Sexual Intercourse.* Sexual activity can be resumed when incisions have adequately healed and you feel ready. There are no restrictions.

BATHING

- *Showering.* You may shower with assistance the day following surgery. Remove your garment. Incisions are covered with a waterproof dressing and require no attention. Replace garment after your shower.
- *Hot Tubs/Baths/Swimming Pools.* No tub baths or Jacuzzi until your incisions have healed, and approved by your surgeon, which is usually around 2 weeks. It is best to wait one month for hot tubs as they tend to have more bacteria than regular chlorinated swimming pools.

HOW TO TAKE CARE OF YOUR INCISIONS

- *Incisions.* Your incisions are covered with a waterproof dressing. No dressing changes or incision care is required. After your first postop visit, the dressing will be removed and special tape will be applied that aids with scar healing. Additional tape is provided so you can continue a planned scar regimen.
- *Stitches.* All stitches are dissolvable.
- *Sun Exposure.* Avoid or minimize sun exposure. Use an SPF30 or greater when outdoors. Even mild sunburn can worsen swelling and irritate a healing incision.
- *Scar gel.* Scars are small and minimal and may take up to a year to fully heal. After your incisions have completely healed and when your doctor has told you it is safe, you can begin to use silicone based gel on your scars to improve healing.

WHAT TO EXPECT

- *Drainage.* Drainage can occur from the incision sites for the first 24-72 hours. The drainage will be blood-tinged. You may use gauze or a light pad to reinforce post-op dressings if needed.
- *Bruising.* You can expect to have bruising. Most bruises will heal after about 2-3 weeks. The bruise will go from a purplish color to a yellow/green shade as it starts to resolve.
- *Swelling.* Swelling is to be expected for weeks and sometimes months. The swelling can improve with intermittent rest and compression garments. Exercise and physical activity can transiently worsen swelling but is encouraged.
- *Itching.* Itching at the incision sites is normal for a few days. You may take Benadryl to help with this.
- *Pain.* It is normal to experience tightness, pressure, soreness, itchiness, and fatigue for several days to weeks following surgery as your body recovers.

- *Sensory Changes in Skin.* You may feel reduced or heightened sensation in the nipples, incision sites, and breast tissue. This is normal. You can expect return of normal sensation after a few weeks to months.
- *Final Result.* It may take about 3-6 months to see final results.

DO NOT'S

- Do NOT apply hydrogen peroxide to incision sites. Keep postop dressings in place until follow-up.
- DO NOT soak in baths, Jacuzzis or hot tubs until all incisions have fully healed.
- DO NOT take Aspirin, Ibuprofen, Naproxen or other blood thinners until your surgeon advises you it is safe.
- Do NOT apply heating pads or ice packs to the treated areas unless otherwise instructed by your surgeon.

EMERGENCY SITUATIONS – WHEN TO CALL THE OFFICE OR GO TO THE HOSPITAL

- *Signs of Infection.* Spreading redness, worsening swelling, increased drainage or drainage of pus, worsening pain and warmth at incision site. Temperature over 101 degrees Fahrenheit.
- *Excessive Bleeding.* If the dressings are saturated with bright red blood and you are having to make very frequent dressing changes.
- *Other Emergency Situations.* Shortness of breath or difficulty breathing, chest pain, lightheadedness that does not quickly resolve, severe vomiting, pain or asymmetric swelling in your legs.

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| SHOPPING LIST |
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1. Prescriptions: fill prescriptions prior to your surgery date
2. Compression Bra: provided to you by The Naderi Center
3. Tylenol (Acetaminophen): alternative to narcotic pain medication if pain is not severe. Do NOT take NSAIDS.
4. Laxative: to reduce constipation that may be caused by anesthesia or narcotic pain medications.