

# THE NADERI CENTER COSMETIC SURGERY SPECIALISTS

### Pre-Operative Instructions for Labiaplasty

#### **3-4WEEKS 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. 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 to 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/Supplements.* Avoid foods, drinks and herbal supplements than 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 antibiotics 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.
- *Shaving.* Shaving is up to your discretion, but not necessary. If you prefer to have the area shaved, please do so two days prior to the procedure.

The Naderi Center

#### 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 <u>NOT</u> wear any makeup, jewelry, cosmetic creams, hair products, deodorant, sunscreen, and remove all piercings.

## Post-Operative Instructions for Labiaplasty

#### **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.* Sleeping on your back will be the most comfortable during the recovery process. You can place a pillow between your legs if this adds comfort.
- *Ice/Cold Compress.* Ice the area for the first few days to a week, 20 minutes on and 20 minutes off. This will help reduce swelling and discomfort.

#### **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 while you are still having to take pain medications.

#### ACTIVITY

- *Physical Activity.* Take it easy for the first week after surgery and avoid prolonged periods of sitting in an upright position.
- *Exercise.* Normal daily activity may be resumed a few days after surgery. Light exercise may be resumed 2-3 weeks after surgery (this also includes straddling activities such as cycling, horseback riding, etc.). Remember to start easy and build back up to your previous exercise levels. Just know that swelling may transiently be worse with exercise.
- *Menstrual Cycle.* No tampons should be used for 6 weeks. Wear a pad if menstrual cycle begins.
- *Driving.* Do NOT operate a vehicle or make important decisions until you have been off pain medications for 24 hours. Use good judgment. Avoid sitting for long driving trips for about two weeks.
- *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. No vaginal intercourse for 6 weeks or until cleared by Dr. Anderson. Sexual activity should only be resumed once you feel ready with no restrictions and incisions have adequately healed.

• *Clothing.* Wear loose, breathable clothing and undergarments to help with irritation. Friction from tight clothing will further irritate the area.

#### BATHING

- *Showering.* You may shower with regular soap and water the day following surgery. Replace your pad after showering.
- *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

- *Incision Dressing.* Your dressing will consist of antibiotic ointment to the incision line and a panty liner in your underwear. Change the panty liner as needed.
- *Ointment Application.* Apply Bacitracin ointment to the incision line once a day. Over application may lead to sutures dissolving prematurely. If no major discomfort, you may forgo ointment application.
- *Stitches.* All stitches are dissolvable.

#### WHAT TO EXPECT

- *Drainage*. Drainage can occur from the incision sites for the first week following surgery. The drainage will be blood-tinged. You may use a pad or liner if this occurs.
- *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 in all surrounding and affected areas is to be expected for weeks and sometimes months. This is an area which can have excessive swelling. This is normal. The swelling can improve with intermittent rest and ice. 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 sensitivity, stinging during urination, discomfort, soreness, 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 vaginal area. 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.
- 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 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.

# SHOPPING LIST

- 1. Prescriptions: fill prescriptions prior to your surgery date.
- 2. Tylenol (Acetaminophen): alternative to narcotic pain medication if pain is not severe. Do NOT take NSAIDS.
- 3. Antibiotic Ointment: (Bacitracin) for application to incision line.
- 4. Pads or Panty Liners: to wear while drainage occurs and replace as necessary.
- 5. Laxative: to reduce constipation that may be caused by anesthesia or narcotic pain medications.