



THE NADERI CENTER

COSMETIC SURGERY SPECIALISTS

PRE-OPERATIVE INSTRUCTIONS FOR RHINOPLASTY & REVISION RHINOPLASTY

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 require that you be evaluated by a specialist if you have any medical conditions that need to be optimized or managed prior to surgery. Please ensure any preoperative requests are completed 2 to 4 weeks before surgery.
- *AC CUTANE.* If you have taken Accutane for acne within the last year but forgot to tell us please inform us as this is a big risk to your healing.
- *Work and Recovery Arrangements.* Make 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. We recommend arranging for a friend or relative to come and be with you for out of town patients.
- *Smoking.* Tobacco, cigarettes, vaping and nicotine consumption will cause poor wound healing, longer healing times, and excessive scarring. We advise discontinuing these products at least 4 weeks prior to surgery.

2 WEEKS BEFORE SURGERY

- *Surgery Pre-op Appointment.* You will come in for your pre-op appointment where you will review the surgery plan with your surgeon again 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, nuts, seeds, avocados, and alcohol. Use Tylenol in place of other over the counter pain medications. You will receive a more comprehensive list separately.
- *Make Sure You Have Completed Your Financial Obligations.* All surgeons' fees must be paid in full at least 2 weeks prior to surgery or surgery will be canceled. If you are using insurance for the functional portion of your nose surgery, double check your insurance benefits so there are no surprises after surgery.

- *Fill Prescriptions prior to 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. Do not lose your scripts. Duplicate pain medicine scripts cannot be given.
- *Watch the appropriate PRE-OP AND POST-OP RHINOPLASTY 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. Review the location of your surgery to make sure you do not go to the wrong hospital.
- *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 CANCELLED.** If you need to take prescription medications, take with a small sip of water.
- *Set Up Home Recovery Area.* This may include pillows, blankets, books, television, food and drinks, ice packs and anything else to assist with a comfortable recovery.

DAY OF SURGERY

- *Dress Comfortably.* Dress in comfortable, clean, and loose-fitting clothes. Shirts that can be buttoned or zipped up are preferred to avoid snagging the nose.
- *Arrival to Facility.* Have someone drive you to and from your designated surgery location. You cannot be released to UBER or a taxi alone. You must have an adult over 18 with you. Remember to bring a form of identification.
- Do **NOT** wear any lotion, sunscreen, mascara, thick gel nail polish or press-on nails, makeup, jewelry (remove all piercings), cosmetic creams, or hair products.

POST-OPERATIVE INSTRUCTIONS FOR RHINOPLASTY & REVISION RHINOPLASTY

NIGHT OF SURGERY

- *Movement is Important.* Make sure to get out of bed and be up and walking slowly with some assistance to avoid lower leg blood clots. When in bed or on

the couch, make sure you are moving your legs and ankles periodically. Take deep breaths to keep your lungs clear.

- *Cold Compress.* Use cold compresses on your eyes, cheeks, and forehead (not nose). Without getting your nose cast too wet. Use frozen peas in a zip-lock bag or other gel packs or frozen washcloths. Refrain from heavy ice packs.
- *Sleep.* Sleep on your back with your head elevated about 45-60 degrees (3-4 pillows with an airplane U-pillow or a wedge). Do not sleep on your side. **DO NOT SLEEP FLAT.** Keeping your body more upright will minimize swelling. Do this for at least 1-2 weeks or even longer. Lying flat will increase scar tissue.

NIGHT BEFORE YOUR SPLINT REMOVAL (1 WEEK POST OP APPOINTMENT)

- *Shower.* Get your face and nose cast soaking wet for 20 minutes under a lukewarm shower (NOT HOT WATER) the night before and the day of your cast removal (2 showers) so that Dr. Naderi can remove your cast easily and painlessly. If you have dry skin take a third shower.

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. Keep in mind some discomfort and pressure or throbbing is to be expected. Do not take too much narcotic pain medications as it has side effects such as nausea and constipation. Narcotic medication refills are seldom given and cannot be “called in” by phone.
- *Antibiotics.* Antibiotics should be started the night of your surgery after your get home and continued until completely finished.
- *Steroids.* Medrol Dose Pack (Steroids) start the DAY AFTER your surgery. Follow the instructions on the medication box until finished. Start with 6 pills the first day and continue 5, 4, 3, 2, 1 over a 6 day course until done.
- *Nausea.* If you are experiencing nausea, which is not rare after general anesthesia as well as a known side effect of some stronger pain medications, we advise that you take your nausea medication.
- *Constipation.* You may 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 taking laxative with the first narcotic pain pill.

- *Medications to Avoid.* Take only those medications approved or prescribed by your surgeon. **Avoid medications containing NSAIDS like aspirin or ibuprofen (Advil, Motrin, Naproxen, others) for two weeks before and after surgery.** These medications will increase bleeding. Avoid blood thinners like Coumadin or Plavix, etc. You should have discussed management of these with your doctors before surgery.
- *Substances to Avoid.* Avoid alcohol, nicotine, and caffeine, for these will dramatically slow the healing process.

NUTRITION

- *Diet.* Eat as tolerated and take small bites. Soft foods are easier to swallow since you will not be able to breathe through your nose and chewing may be uncomfortable. Dark green leafy vegetables and pineapple juice can help reduce bruising and swelling. Eat lots of pineapples. Continue following your dietary and supplement restriction from before surgery for 2 more weeks after surgery.
- *Hydration.* Stay hydrated by drinking 8-10 glasses of water a day. Use straws when drinking fluids. Avoid alcohol while you still have to take pain medications.

ACTIVITY

- *Physical Activity.* Refrain from any physically exerting activity. No bending over, straining, or lifting more than 5 lbs for the first week after surgery. **DO NOT RAISE YOUR BLOOD PRESSURE OR HEART RATE.**
- *Exercise.* No exercise or straining for at least 1 month until Dr. Naderi examines you. Anything that can raise your heart rate increases swelling which causes more scar tissue. Leisurely slow walking around is acceptable and can help bring swelling down but do not be tempted to powerwalk/speed walk.
- *Return to Work.* Most patients return to work after their cast is removed at their one-week appointment. This however depends on their job responsibilities and amount of face-to-face interaction and bruising.
- *Avoid Major Events or Photographs for 1-3 months.* While most go back to school or work after 1-2 weeks we recommend you avoid job interviews, TV interviews, head-shot photographs for a longer period.
- *Driving.* Do NOT operate a vehicle or make important decisions until you have been off narcotic pain medications for 24 hours. Use good judgment.
- *Smiling.* Refrain from excess smiling and laughing. Do not open your mouth too wide. These actions cause the tip to drop prematurely. Try to keep a stiff upper lip and face without much movement for a month.

- *Travel.* Avoid unnecessary air flights, such as vacations and leisure trips. Pressure from flying increases swelling and scar tissue. Delay flights as long as possible. For long distant patients we may re-tape your nose for your flight back.
- *Blowing Your Nose.* If you have to sneeze, do so with your mouth open. No nose blowing and no nose wiping for a month. This may give you a nosebleed or dislodge grafts.

BATHING

- *Showers.* You may take lukewarm showers from neck down, but do not get your face wet. **NO HOT SHOWERS OR BATHS as it may cause a nose bleed or dizziness.** You must keep your nose cast dry until the night before the cast removal appointment.
- *Hot Tubs/Baths/Swimming Pools.* No tub baths or Jacuzzi until your incisions have healed, and approved by your surgeon, which is usually around 6 weeks.. **Do not submerge your head under pool, lake or ocean water for 6 months.**

RHINOPLASTY RECOVERY CARE INSTRUCTIONS

- *Drip Pad.* Use the Drip Pad for at least 48 hours (You may stop after 48 hours or continue using it for the duration of the week). Change the drip pad gauzes every 10-20 minutes initially as needed. Apply a THICK layer of Vaseline ointment on each NEW gauze before placing under the nose to keep nostrils moist. Over the next day drainage should slow down but still change the gauze at least every 2 hours.
- *Stitches.* Do not cut, pick at, or try to remove the stitches. They are dissolvable and will dissolve on their own. Dr. Naderi will trim any irritating stitches at your post-operative appointment.
- *Cleaning of the Nose.* **Gently** clean around your nostrils 4-6 times a day starting 2 days after surgery with Hydrogen Peroxide soaked Q-tips. Apply a thick layer of Vaseline after each cleaning. Keep the nostrils clean and scab-free but do not go deep into the nose. We do not want the blood and mucous hardening and scabbing. Keep it moist. Lots of ointment. Do NOT go digging inside with the Q-Tip. Do this yourself. We do not want parents or anyone else doing this for you. You must do your own "Cleaning". Do not explore or look inside your nostrils.
- *Cast.* Do not cut, pull, or trim any part of the tape of the cast. Leave it alone. If it starts to come off, email us a photo. We may remove and re-tape your nose. If the skin becomes red or bumpy or increases in itchiness please let us know as this can be an allergic reaction to the tape.

- *Packing.* You may have “absorbable foam” which does not cause pain and does not need to be removed. Do not manipulate it. Cover the nostrils with a thick layer of Vaseline. If you have actual “Packing” apply a thick layer of Vaseline over the nostrils to keep packing moist. Do not attempt going inside the nose. Do not trim the string.
- *Saline Spray.* Use Saline Nasal Sprays gently starting 10 days after surgery to moisten blood clots inside your nose. You may sniff gently. Do not blast it in there. Be gentle. Most of it will drip out due to internal swelling.

WHAT TO EXPECT WITH HEALING AFTER SURGERY

- *Swelling.* Swelling is to be expected for many months following a rhinoplasty. The more you ice the cheeks, eyes, and forehead the first 2 days, the easier and faster your recovery and the better your moving forward. **DO NOT BE LAZY WITH THE ICING.** The less swelling, less scar tissue, the faster the recovery and nicer results. Swelling gets worse after splint removal. The nose will change hourly & daily for years to come. Exercise, physical activity, sun, heat, airline travel, etc. can worsen swelling. It takes up to a year for major reduction in swelling but 3-5 years for full resolution of swelling. You can still enjoy your new nose even after a week but know that it will change so do not over analyze it. We may recommend nightly taping of your nose after cast removal in some cases.
- *Bruising.* It is normal to have bruising around the eyes and nose. Most bruises heal after about 3-4 weeks. The bruise will go from a purplish color to a yellow/green shade as it starts to resolve.
- *Stiffness.* Your nose and smile may be stiffer as everything heals. This should improve over the next few weeks to months.
- *Breathing.* Internal nose swelling from the surgery can restrict airflow through the nose. One side of the nose may be easier to breathe through than the other. While some patients may get improved nasal airflow after a few weeks, some take longer. Nasal steroid spray use as well as anti-snoring stents starting a month after surgery may help.
- *Drainage.* You will have bloody colored drainage after surgery. The Drip Pad will help catch this drainage. You may have thick mucus with bubbles forming.
- *After Splint Removal.* When the cast comes off there will be swelling. The swelling will get worse the following week. The nose will be more upturned. Your face may look “odd” to you. This is normal. You may even experience shock, panic or crying. These are normal reactions in a minority of patients. But usually you have a nicer nose even with swelling than your old nose.

- *Skin Changes.* It is normal for the tip of the nose to be numb. This is temporary and will improve with time. Your skin may be dryer or oilier. Your nose may be runnier or dryer. Your skin may be redder. You may have pimples.
- *Cleansing Nose Skin.* GENTLY clean the outside of the nose with Astringent or 2% Salicylic Acid anti-acne Toner soaked cotton balls. No aggressive wiping. DO NOT MOVE THE NOSE.
- *Asymmetries.* There will be swelling 100% of the time and minor asymmetries inside and outside the nose 100% of the time. These are normal. New slight irregularities may result along where bone and cartilage edges are healing. These are normal. Most of these subtle irregularities or asymmetries are to be left alone. A very minor “touch-up” revision may be required to smooth things out in about 5-10% of cases after a year. Sometimes repeat temporary fillers can help make it perfect avoiding another surgery. We monitor your healing. But do not expect “perfect!”

DO NOT’S

- DO NOT use Q-tips inside the nose for the first 2 days. Be gentle with Q-Tips even afterwards. Aggressive or deep cleaning can start a nosebleed and require a trip back to surgery and additional costs to you!
- DO NOT wear sunglasses or goggles for at least a month.
- DO NOT get too close to dogs, kids, hugs, and crowds. Avoid hits to the nose.
- DO NOT take Aspirin, Ibuprofen, Naproxen or other blood thinners until your surgeon advises you it is safe.
- DO NOT put pressure on the nose.
- DO NOT USE “Bioré Strips” for at least 3 months.

EMERGENCY SITUATIONS – WHEN TO CALL THE OFFICE (703)481-0002 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 gauze pads are non-stop saturated with bright red blood or clots and you are making very frequent dressing changes sooner than 5 minutes or blood clots in your throat.

- *Other Emergency Situations.* Shortness of breath or difficulty breathing, chest pain, lightheadedness that does not quickly resolve, severe vomiting, pain or asymmetric swelling or pain 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 mild.
3. Straws. Straws will aid in maintaining good hydration after surgery.
4. Frozen Pea-Packs. Take a handful of frozen peas and place them in a small sandwich bag. Make multiple “pea-packs” to have on hand. These packs should be lightweight and will be placed on the eyes, forehead and mid-face, DO NOT PLACE THEM ON THE NOSE.
5. Vaseline. Used to keep nose lubricated
6. Q-tips. Used to apply ointment and peroxide.
7. Hydrogen Peroxide. Used for gently cleaning of dried blood.
8. Arnica. An herbal supplement that can reduce swelling and bruising.
9. Fresh Pineapples &/or Cold Pressed Pineapple Juice. Helps reduce swelling.
10. Simply Saline OR Pretz Saline: Start using 10 days after surgery to keep nose moist. DO NOT USE MEDICATED DECONGESTANT NASAL SPRAYS.
11. Lozenges: to ease sore throat after surgery which can occur from mouth breathing &/or anesthesia tube. (Make sure there are no herbal ingredients)
12. Humidifier. To moisten air for added breathing comfort.