



Fat Transfer to Face – Patient Instructions

Pre-Operative and Post-Operative Care | Outpatient Surgical Facility

PREPARATION BEFORE SURGERY

- Pick up and confirm you have all prescriptions before surgery.
- Purchase MiraLAX (stool softener), Tylenol (for pain) and cold compress supplies.
- Get Arnica tablets. If provided, take as directed starting after surgery.
- Nothing to eat or drink after midnight before surgery or Anesthesia will cancel surgery.
- Prepare a comfortable recovery area at home.
- Strictly follow and adhere to the “**Naderi Antibleeding Anti Bruising diet.**” See separate list.
- Avoid blood thinners and NSAIDs like aspirin, ibuprofen, naproxen, as well as nicotine, alcohol, and excessive caffeine.
- **Avoid Tobacco and nicotine starting 2 weeks before** procedure as it will not allow fat cells to “take and survive.”

DAY OF SURGERY

- **Shower well. Shampoo hair thoroughly** and use antibacterial soap on face and body.
- Wear loose, cool, comfortable clothing. Do not wear tights or leggings. Button-up or zip-up shirts are preferred.
- Do not wear makeup, lotion, skin products, sun block, deodorant, or hair products
- Remove jewelry, piercings, contact lenses,
 - Remove hair extensions, weaves, braids and lash extensions (if possible) as they can harbor bacteria
- You will need an adult to drive you home.

FIRST WEEK AFTER SURGERY

- Sleep on your back with your upper body elevated 45 degrees. (Recliner or wedge pillow or multiple pillows)
- Apply cool compresses for 15–20 minutes every hour while awake for the first 3 days.
 - Do not use ice directly on skin
- Get up slowly and walk slowly but regularly with assistance to promote circulation.
- Avoid bending, straining, or lifting.
- You may feel weak and dehydrated so be careful of falling. Stay hydrated.
- You may shower 48-72 hours after surgery but be careful of falling. No Bathing.
 - Use gentle pressure and lukewarm water. Do not rub incisions. Do not use combs or brushes around incision.

MEDICATIONS

- Take antibiotics as prescribed until finished. Notify us if you have any reactions.
- Use prescribed pain medication or Tylenol (if pain is mild).
- Do not exceed 4,000 mg of Tylenol in 24 hours.
- Use your nausea medication as needed.
- Begin stool softener when taking narcotic pain medication. Do not force or strain during bowel movement.
- Take your Medrol steroid dose pack as instructed.



INCISION CARE

- Unless directed otherwise, remove your pressure wrap from the “donor site” the next afternoon after surgery.
- Do not remove steri-strips or clear “Tegaderm” tape that may be covering the incisions.
 - For all other incisions or if tape falls off:
 - clean with Q-tip dipped in diluted Hydrogen Peroxide gently 3-4 times a day.
 - “Roll the Q-tip.” Don’t scrub.
 - Mix half peroxide with half water in the cap then discard excess.
- Use HOCL (Hypochlorous Acid) spray on skin and incisions 3 times a day as an antiseptic
- Apply prescribed antibiotic ointment or Vaseline ointment as directed 3-4 times a day very gently to open incisions.
- Do not pick or pull at incisions.
- Sutures are typically dissolvable or removed 6-12 days after surgery.
- Protect skin and incisions from sun exposure. Use a large hat and loose clothing
- Do not apply ice directly to skin as you may be numb and may cause a frostbite burn.
- Do not bathe or get into a pool or jacuzzi
- Do not apply makeup to incisions

ACTIVITY AND RECOVERY

- Avoid lifting over 20 pounds for 2 weeks.
- Most patients return to work in 1–2 weeks.
- Avoid strenuous exercise for 3–4 weeks.
- Do not drive while taking narcotic pain medication.

NORMAL SYMPTOMS

- Swelling and bruising.
- Mild bleeding or drainage.
- Mild asymmetries.
- Noticeable incisions.
- Mild itching
- Mild lumps and bumps or divots

NOTIFY YOUR DOCTOR IMMEDIATELY IF YOU EXPERIENCE:

- Fever greater than 101°F.
- Severe or worsening pain or swelling.
- Excessive bleeding.
- Rash or severe itching or blisters.
- Call 911 if you experience shortness of breath or chest pain.