

Postoperative Instructions for Patients Undergoing Suction Assisted Lipectomy (SAL or 'Liposuction')

1. Getting home and postoperative supervision.

It is extremely hazardous to drive after general anesthesia or intravenous sedation. Please arrange for a responsible adult to drive you home and stay with you for at least 24 hours.

2. Activity for the first 24 hours.

The effects of anesthesia can remain in your body as long as 24 hours. After surgery, you must plan to rest for 24 hours. Avoid straining and stooping. Generally, when resting, elevate the surgical area.

3. Diet.

After surgery you may take liquids such as soup, tea, soft drinks, or Jell-O. Gradually progress to a soft diet and then to a regular diet over the next 24 hours.

4. Medications, herbal supplements, vitamins, and alcohol.

Regular Medications. You may resume your regular medications unless Dr. Boyd directs otherwise. However, avoid aspirin and aspirin-containing products for two weeks before and after surgery. Remember, many herbal supplements adversely affect the clotting process and actively cause bruising and bleeding. These should be stopped two weeks before surgery and may be resumed two weeks afterwards. Dr. Boyd does not recommend taking mega doses of vitamins more than the normal daily requirement (which is adequately met by a normal balanced diet). Please discontinue this form of medication for two weeks before and after surgery unless you are being treated for a specific deficiency. One multivitamin tablet per day is permissible, however.

Discharge Medications. Fill your prescriptions and take your post-operative medications as directed. If you should become nauseated or develop a rash, call the office

Pain Medications. Most strong pain medications are derived from morphine and are called opioids. They can induce varying degrees of nausea and vomiting in different individuals. If this is the case with you, try reducing the dose and taking the medication with meals. If the nausea persists you should take the anti-nausea medication as directed. If you remain nauseated, contact Dr. Boyd who will switch you to an alternate pain killer; but remember, any opioid can potentially make you sick. Persistent nausea may necessitate discontinuing opiates altogether and taking Tylenol or Ibuprofen instead. In any case, it is advisable to stop taking opioids as soon as possible to eliminate the associated drowsiness, hasten your recovery, and reduce the risk of dependence.

Stool Softener. Opioids can cause another troublesome side-effect: constipation. Avoid this by taking Colace 100mg twice daily or a stool softener of your own choice.

Antinausea medications. Dr. Boyd usually prescribes a medication that dissolves under your tongue. You may take this three times daily. Please note that this medication also causes constipation!

Antibiotics. Take postoperative antibiotics if directed. If you develop an itchy rash call Dr. Boyd's office.

Alcohol. Avoid alcohol until post-operative medications are finished.

5. Dressings.

The elastic pressure garment should remain on at all times for the first week. However, it may be removed for daily showering and replaced as quickly as possible. For the next three weeks it must be worn all day long and removed only for showering and on retiring to bed.

6. Wound care, shampooing, showering.

Two days after surgery, remove the elastic garment and dressings but leave any Steri-Strips in place; take a shower, and replace the garment immediately. Thereafter, shower and shampoo daily replacing the garment each time. Do this for one month.

7. Activity after the first 24 hours (including driving).

The day after surgery, get out of bed and walk around the house. Do this several times a day increasing the activity as tolerated. After two weeks, you may swim and walk longer distances, but avoid strenuous exercise for six weeks. Do not drive for one week and never while taking pain medication.

8. Things to avoid. (See 2 and 5 also)

It is vital that you do not smoke after surgery to avoid respiratory and wound healing complications.

9. Bruising, swelling and other normal events.

It is normal to have swelling and bruising of the surgical area. This may actually increase over the first few days, but it will

gradually improve over a couple of weeks. However, fever, shortness of breath, chest pain or unusual pain in the operated area, especially on one side, should be called to the attention of Dr. Boyd immediately. Someone in the office will call you the day after surgery to check on your condition and answer any questions you might have. You can reach Dr. Boyd or a staff member around the clock by calling (310) 295-2287.

These instructions are not intended to cover every possible problem that could arise. Good judgment on your part is essential for a good result.