Postoperative Instructions for Patients Undergoing Fat Grafting

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 one to two days.

2. Activity for the first 24 hours.

Immediately following the surgery, high-impact activities should be avoided, especially any type of bouncing. After surgery, you should plan to rest for 24 hours. Avoid straining and stooping. Generally, when resting, elevate the surgical area.

3. Sleeping and sitting positions.

After undergoing a fat grafting procedure, you must sleep and sit in positions that avoid putting pressure on the areas into which fat was transferred. It is generally best to sleep with the fat transfer area elevated, if possible.

4. Diet.

After the surgery, you may consume liquids such as soup, tea, soft drinks, or Jell-O. Try to limit sodium intake to reduce swelling. After surgery, be sure to drink enough water to prevent dehydration. Gradually progress to a soft diet and then to a regular diet over the next 24 hours.

5. 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.

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

<u>Pain Medications.</u> 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.

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

<u>Antinausea medications.</u> 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!

<u>Antibiotics.</u> 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.

6. Dressings.

If given a compression garment, wear it for 23 hours a day to mould the area from which the fat was taken. It is perfectly acceptable to take it off for one hour per day to shower, but it should be replaced as quickly as possible. Avoid compression on areas to which fat was transferred.

7. Wound care, shampooing, and showering.

After 24 hours, you may shower. Use lukewarm water only when showering. Make sure you have someone with you the first time you shower in case you start to feel light-headed. Please do not ice the surgical areas unless given clearance by Dr. Boyd. You may start wearing makeup the day after the procedure.

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

Start walking after your surgery, as this helps to reduce swelling and lowers the chance of blood clots. After one month, light activities, such as fast-paced walking, can be performed. Do not drive for one week and never while taking any pain medications.

9. Things to avoid. (See 2, 3, and 5 also).

It is vital that you do not smoke after surgery to avoid respiratory and wound healing complications. Smoking should be avoided for at least two weeks after the surgery. You should also avoid significant weight gain since the fat cells in your body that have been shifted around may give rise to a deformity.

10. Bruising, swelling, and other normal events.

You may have bruising, swelling, and mild discomfort in the part of the body from where the fat was harvested. This is normal and will gradually resolve over a period of a few days to 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.