

ABDOMINOPLASTY POST-OP INSTRUCTION SHEET

The following post-operative instructions are specific to your procedure & are meant to serve as guidelines to help you through your recovery. Please read them carefully.

- **EMERGENCIES**

A hematoma is the most common emergent event within the first 24 hours. If your abdomen swells to twice its size or your drains bulbs fill immediately (within 30 minutes) after emptying, call Dr. Cooper immediately. Rest assured ~ this is not a subtle event! You will know when to call.

For routine matters, please call the office during normal business hours (9AM – 5PM). If you have an emergency that cannot wait, I am available by cell phone (307) 699-3115 on evenings & weekends. Kylee is also available by cell phone at (307) 222-4194. Please respect our family time & call ONLY for urgent or emergent issues. Non-emergent phone calls or texts after hours & on weekends will be subject to a \$100.00 fee.

Examples of urgent or emergent issues include the following: sudden onset or extreme swelling of the surgical site, redness / warmth involving your incision(s), fever >101.5 or unilateral calf pain or swelling. If you have a life-threatening emergency, such as crushing chest pain or shortness of breath, call 911 immediately. Do not try to reach me first. If you have any questions on a Thursday or Friday, please call the office to have those questions answered. Do not delay those questions & have those issues become an urgent matter over the weekend.

- **NARCOTICS AND PRESCRIPTION MEDICATIONS**

Nausea is normal when taking multiple medications. To minimize this, avoid taking medications on an empty stomach. Try to stagger your medications 30 minutes apart. You may “halve” the pain pills or muscle relaxers if they are too strong for you. If your pain is relatively well-controlled, you may alternate your pain medication with extra-strength Tylenol. Motrin / Aleve / Ibuprofen may also be used beginning 7-10 days following your procedure.

You will receive ONE prescription for pain medication. No refills on narcotics will be authorized for this procedure, so please use them wisely. Refills on all other prescriptions will not be authorized after hours or on weekends. Please plan ahead accordingly.

If you are taking narcotics for any other reason prior to your procedure, please take this into consideration. Consultation with your pain management physician prior to your surgery is highly encouraged & is the responsibility of the patient.

Arnica & Bromelain are recommended homeopathic supplements which facilitate resolution of bruising and swelling after surgery. These may be found online, at your local pharmacy, or at Whole Foods.

- **ANESTHESIA**

You may experience a sore throat after surgery. This is common after general anesthesia & will resolve in a few days.

- **NAUSEA**

Nausea is common after general anesthesia. Anti-nausea medication will be prescribed for you. A clear liquid diet is recommended until the nausea subsides, after which time you may resume a regular diet.

- **BANDAGES AND INCISION CARE**

You may notice some blood or drainage on your dressings the first few days following surgery. This is normal & generally results from bleeding along the skin edges. If the bandages become saturated, you may remove the dressings & apply pressure with a gauze or clean washcloth. Ten minutes of continuous pressure will stop minor bleeding. Afterwards, you may redress your incision(s) with dry gauze & tape.

If your bandages remain dry, simply leave them intact until your follow-up appointment.

Cold compresses are acceptable. However, please **DO NOT APPLY ICE OR HEAT DIRECTLY** to the surgical site. Your recently operated skin cannot sense extremes of temperatures, which can result in heat or cold burns and compromise your results.

- **PERSONAL CARE**

Please do not shower until you have been seen for your first post-op visit. This generally occurs 7-10 days after your procedure. You may take a “sponge bath,” but do not get your incisions wet. Lume wipes & deodorant are useful during your early post-op recovery (www.lumedeodorant.com). Replace your binder immediately thereafter. No tub baths for at least 6 weeks.

- **DRAIN CARE**

Careful attention to drain hygiene is important to prevent infection. Do not remove the sterile dressings around your drains. **DO NOT DISCONNECT THE BULB FROM THE DRAIN TUBE FOR ANY REASON.** Wash your hands before and after caring for your drains. Strip / Empty / Record Drain output every 8 hours. Bring drain record with you to **EVERY** post-op appointment. Your drains will not be removed until we have seen your drain record to assess not only the quantity, but also the trend of the drain output. **DO NOT REMOVE YOUR OWN DRAINS!** We are not responsible for infection, seroma formation (fluid accumulation), or wound healing complications if you choose to do so.

- **DIET**

If you experience nausea after surgery, a clear liquid diet is advisable until the nausea subsides. Otherwise, there are no dietary restrictions after surgery. Drink plenty of water! Water intake & stool softeners will help minimize constipation from narcotics (pain medication) after surgery.

- **CONSTIPATION**

Constipation is a common complaint after surgery & can be associated with anesthesia and narcotics (pain medications). Hydration & utilizing pain medication only when absolutely necessary will help minimize this. Stool softeners & laxatives (Colace, Dulcolax, Miralax) are over-the-counter medications that can help alleviate your symptoms. If these are insufficient, a Fleets Enema is the next best option.

- **SLEEP**

Finding a comfortable position after surgery can be a challenge! Sleeping in a flexed position (with pillows or in a recliner) may be more comfortable for the first few days after your procedure. You may gradually resume sleeping in your natural, preferred position thereafter.

- **ITCHING / RASHES**

Itching around your incisions is normal & is to be expected after surgery. It is considered a sign of healing. However, severe itching with redness or blistering is often a sign of a reaction to medications or adhesive. If you experience itching with redness or blistering around your incisions, gently remove your dressings & take an antihistamine. Benadryl, Claritin, Allegra, Zyrtec, or Xyzal are all acceptable. You may also use Benadryl cream, but do **NOT** use any topical containing hydrocortisone.

Please let us know if you have a sensitivity to adhesives or tape prior to surgery. This will help avoid skin sensitivity involving your incisions.

- **GARMENT**

Binder wear is mandatory until your drains have been removed. Thereafter, a Marena compression garment or Spanx is highly encouraged for an additional 6 weeks.

If the elastic in your binder causes itching, a loose T-shirt or something similar beneath the binder is helpful.

If your binder is uncomfortable and needs to be repositioned, you may remove and reposition it, keeping the garment snug but not tight. You should be able to take a deep breath without feeling restricted with your garment in place. If your compression garment needs to be washed, you may remove your binder, wash it, and replace it as soon as it is dry.

- **DRIVING**

Wait at least 24 hours after you have stopped taking prescription pain medication to operate a vehicle.

- **EXERCISE**

No heavy lifting, pushing, or pulling (<10 lbs) for 3 weeks. You may resume light exercise (treadmill, elliptical) after ~3 weeks with gradual return to your “normal” level of activity at 6 weeks.

Examples of light exercise include the following: walking to the mailbox or up and down your driveway, assuming there is not a steep incline. Short trips to the grocery or church are also appropriate. Extensive hikes or bikes are not considered appropriate activity during your recovery and should be delayed for 6 weeks.

- **SEXUAL ACTIVITY**

You may resume sexual activity after 2 weeks. Please remember that you have recently had a major surgical procedure & utilize good judgement.

- **ALCOHOL**

You may consume alcoholic beverages once you are no longer taking prescription pain medication. However, please take into consideration other medications you may be taking & how they may interact with alcohol.

- **FEVER**

There is no reason to check your temperature after surgery unless you believe it to be extremely high. Your body will respond to the “injury” of surgery with a low-grade fever for several days. This is a normal reaction to stress & part of the healing process. If you do experience increased warmth or redness around your incisions OR fever (>101.5), please call the office.

- **SWIMMING**

No swimming (chlorine / saltwater / other) for 6 weeks.
Drains must be out & incisions must be completely healed.

- **TRAVEL & SCHEDULING**

No travel for 6 weeks following your procedure. This is non-negotiable.

Our OR time is valuable. If you already have plans to travel, please take this into consideration prior to choosing a date for your procedure to avoid multiple rescheduling attempts with our office and the surgery center.

- **SOCIAL SUPPORT AND HOME CARE**

You **must** have someone to stay with you for 24 hours following your procedure. You will need assistance the first few times you get out of your bed or chair to prevent falls. If you live alone and need recommendations for after-hours care, please let us know and we will be happy to provide you with resources.

Pre-plan your meals and make sure you are prepared for your recovery with snacks, drinks, and extra wound care supplies. Hand sanitizer, alcohol, gloves, and extra gauze are useful to have on your bedside table for the first few days following your procedure.

- **MENTAL HEALTH**

We understand that surgery is stressful and are here to support you with any surgical-related questions during your recovery. However, you are responsible for the quality of your mental health. If you take any medications for mental wellness, please make sure those are optimized prior to your procedure to make your recovery as smooth and pleasant as possible.