

TORSOPLASTY 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 20-30 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 refill on your prescription for pain medication. Refills 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 and 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 & INCISION CARE**

Due to procedure and incision length, some drainage is to be expected. 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**

Most (but not all) of your incisions will be dressed with waterproof dressings following your procedure. Some areas are simply not amenable to maintaining a dressing for any length of time. 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.lumedeoderant.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.

- **STITCHES**

Most of your stitches are dissolvable and will not need to be removed. However, you may also have some external stitches (and perhaps even staples) that will need to be removed during your post-operative visits.

- **GARMENT**

Binder wear is mandatory until your drains have been removed. If the elastic in your binder causes itching, we suggest a loose T-shirt or something similar beneath the binder. Thereafter, continuous compression (SPANX) is strongly encouraged for the first 6 weeks. Over the years, we have found that SPANX tend to be more comfortable, and patients tend to be more compliant with compression if the garment is easy to wear. It is your responsibility to purchase compression wear prior to surgery.

You may remove the garment to shower. Otherwise, wear should be 24/7 for the first 4 weeks while gradually decreasing the length of time worn thereafter.

- **DRIVING**

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

- **EXERCISE**

Walk frequently - once every hour while awake. No heavy lifting (<10 lbs) for 3 weeks.

You may resume light exercise (treadmill, elliptical) at 3-4 weeks.

All restrictions on exercise lifted at 6 weeks.

- **SEXUAL ACTIVITY**

You may resume sexual activity once your drains have been removed. Please remember that you have recently had a major surgical procedure and utilize good judgement.

- **ALCOHOL**

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

- **FEVER / REDNESS**

If you experience any increased warmth or redness around your incisions or fever (>101.5), please call the office.

- **SWIMMING**

No swimming (chlorine / saltwater / other) for 4 weeks. Your drains must be out and your incisions must be completely healed.

- **TRAVEL**

No travel for 4-6 weeks following your procedure.

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.