

Pre- and Post- Operative Book

## PREPARING FOR SURGERY

## Medical Clearance(s):

Patients 50 or older: You are required to be medically cleared for your procedures by your primary care physician. This consists of getting bloodwork, an EKG, an M.D. stating you are medically clear for your specific procedure(s) in writing and including your complete history and physical notes with the other tests. Most patients make this appointment with their primary care physician. Only an M.D. can sign off on your having your surgery. If you need a referral, please let us know. All test results and statements must be dated within 30 days of your surgery date-NO EXCEPTIONS.

Patients who are under the care of a specialty physician, such as cardiac, neurology, pulmonary, will require a statement of medical clearance from that specialty physician in addition to their regular primary care. The specialty statement must be dated within 30 days of your surgery date- NO EXCEPTIONS.

Patients 40 or older having breast surgery: You are required to provide us with a mammogram report dated within 1 year of your surgery. Please do not delay in scheduling this; often additional imaging may be needed, and this can be timely!

Rhinoplasty/Abdominoplasty/BBL/Liposuction patients under 50: You may be required to obtain blood work. If so, the information will be provided to you at your pre-operative visit.

- Failure to disclose pertinent medical history which would require specialty medical clearance-Forfeiture of deposit.
- Failure to schedule required medical clearance appointment, specialty physician clearance, blood work or breast imaging causing a delay in your surgery date Forfeiture of deposit.

You must schedule your medical clearance/specialty clearance appointment within 30 days of your surgery date and before your pre-operative visit with us. (Example: Surgery is February 1 and your Pre-Op Is January 22. Your appointment needs to be after January 2 and before Jan. 22.) During your pre-op visit with us, you will be able to discuss your procedure(s) more extensively with your doctor, review risks associated with surgery, take your 'before' pictures, receive electronic prescriptions, electronically sign consent forms, review pre-and post-op protocols, and finalize payment.

• Failure to notify surgeon's office about removing a procedure(s) prior to the pre-operative appointment which results in less surgery time than what is currently scheduled- \$1500 penalty.

# No <u>Nicotine</u>, <u>Cannabis</u>, <u>Hemp</u>, <u>CPD Oil</u>, <u>Edibles and Vaping</u> 6 Weeks Prior to Surgery.

Patents with a nicotine history will be nicotine tested at the pre-operative visit and/or day of surgery.

The nicotine in tobacco constricts the blood vessels of the body. This effect is immediate and lasts up to one month. Furthermore, nicotine will reduce the amount of oxygen delivered to the body. This constriction of blood vessels and reduction of

oxygen delivery will affect the circulation of the tissues handled during surgery. As a result, necrosis (tissue death), infection and delayed healing may occur. Facelifts, abdominoplasty (tummy tucks), breast reductions and many other plastic and reconstructive procedures require extensive undermining and manipulation of the skin and tissues. The use of nicotine can compromise the healing and cosmetic outcome of these procedures.

Failure to stop smoking, chewing tobacco, medical marijuana, THC/CBD gummies/oils, or Vaping causing a delay or cancellation of your surgery date - Forfeiture of deposit.

#### IMPORTANT INFORMATION ABOUT DIET PILLS, BLOOD THINNERS, ALCOHOL AND SUPPLEMENTS

- ❖ It is imperative that patients having surgery discontinue any diet pills for at least 4 (four) weeks prior to surgery and for 2 (two) weeks after surgery. This means all prescription or non-prescription diet pills. This includes, but is not limited to, Redux, Phen Fen (Phentermine and Fenfluramine), metabolife, Ephedra and herbal diet pills. \*\*We Require stopping Ozempic, Mounjaro, Semaglutide injections for weight loss 4 weeks before your surgery and can restart these 2 weeks after your surgery.
- \* Reactions between diet pills and anesthetic drugs could result in disturbances in your heart rhythms and could even cause cardiac arrest or death.
- ❖ It is **imperative** that you discontinue over the counter drugs a minimum of 2 (two) weeks prior to surgery and 2 (two) weeks after. This includes aspirin, Advil, Celebrex, ibuprofen, Meloxicam, Motrin, Aleve, Excedrin, fish oil and vitamin E and CBD oil.

If you are taking a prescription blood thinner, please discuss with our office and prescribing doctor for parameters to safely stop and when to resume.

\*\*\*Tylenol is the only over the counter pain medication that will not thin your blood and is safe to use\*\*\*

- ❖ We recommend eliminating alcohol for at least 2 weeks before your procedure. This time frame varies depending on your procedure. Alcohol is a blood thinner.
- ❖ If you have not informed your doctor of your usage of these medications, please do so immediately.

## **❖** TAKE MULTIVITAMINS AND VITAMIN C

You can continue to take your multivitamins and add vitamin C to improve your general health and promote healing once you have scheduled your surgery.

## OTHER VITAMINS/HERBALS/OVER THE COUNTER SUPPLEMENTS

These should be stopped 2 weeks before your procedure. Many vitamins/herbals and dietary supplements contain blood-thinning products that can put you at an increased risk for bleeding.

Failure to discontinue diet pills, weight loss injections, blood thinners, alcohol, and herbal supplements prior to surgery - Forfeiture of deposit.

## PLANNING AND OPTIMIZING YOUR RECOVERY

- Now that you have decided to have surgery, where you would like to recover, and whom you would like to have assist you is an integral part in your preoperative planning.
- ❖ You will be required to sleep on a 30-45 angle in your post-op phase (semi sitting). This will be discussed with you in your pre-op appointment depending on your procedure.
- ❖ Your recovery care will be discussed with you at your pre-operative appointment. Upon your discharge and for the first 24 hours following surgery, you cannot be alone. If you do not have a responsible adult to help you during this time, our office can assist you in planning postoperative care. You cannot use Uber to bring you home.
- ❖ We will discuss surgical garments in your pre-operative appointment.
- The pre-operative visit, or sometimes called a 'pre-op,' is <u>not the time to adjust your procedures.</u> If you are considering removing or adding procedures, please notify us prior so we can schedule you for an additional consultation.
  - Cancellation at least 3 weeks prior to surgery date Full Refund of deposit
  - Cancellation or rescheduling less than 3 weeks prior to surgery date Forfeiture of deposit.
  - Cancellation or rescheduling 2 days or less prior to surgery Forfeiture of deposit plus a \$500 physician fee due on demand or, if the surgical fees have been paid in full, to be deducted from such surgical fees.
  - Rescheduling your surgery more than once Rescheduling Fee of \$300

## BEFORE SURGERY

## **❖** CONFIRM YOUR SURGERY TIME

For surgery that is taking place at our surgery center, our RN will call you to confirm the time of your surgery and answer any questions. If you are not going to be available for the call, please call us. \*For Monday surgeries this call will happen on the Thursday prior.

#### ❖ PRESCRIPTIONS

Make sure you have filled **all** your prescriptions our surgeon sent in and that you have all your products needed for post-operative care. Bring **ALL** your prescriptions with you to surgery.

The health of our patients is our top priority prior to your surgery. If you experience any changes to your health such as a cold, cough, fever, nasal congestion etc., or have been in contact with anyone ill. Please contact our office as soon as possible.

## <u>Preoperative Hibiclens [Chlorhexidine] (CHG)/ or</u> Antibacterial Soap Showering Instructions

Chlorhexidine should not be used by people who know they are allergic to it. It should not be used on any area above your neck or pubic area. For any surgery involving Eyelid, Face, Neck, or Nose surgery, please use antibacterial soap.

Before surgery, you can play an important role in your own health. Because skin is not sterile, we need to be sure your skin is as free of germs as possible before surgery. You can reduce the number of germs on your skin by carefully washing before surgery. Following these instructions will help you be sure that your skin is clean before surgery.

**IMPORTANT:** You will need to shower with a special soap called chlorhexidine gluconate (CHG). A common name for this soap is **Hibiclens**, but any brand is acceptable to use. The soap may come in a liquid form, and you will only need a 4 oz bottle.

Substitute Dial Antibacterial soap for Eye, Face, Neck, and Nose surgeries.

- 1. With each shower or bath, wash your hair as usual first with your regular shampoo.
- 2. Shower or bathe with chlorhexidine (CHG) the night before your surgery and the morning of your surgery. Do not shave the area of your body where your surgery will be performed.
- 3. Rinse your hair and body thoroughly after you shampoo your hair to remove the shampoo residue.
- 4. Apply the chlorhexidine (CHG) soap to your entire body ONLY FROM THE NECK DOWN. Do not use chlorhexidine (CHG) near your eyes or ears to avoid permanent injury to those areas. Wash thoroughly, paying special attention to the area where your surgery will be performed.
- 5. Turn water off to prevent rinsing the soap off too soon. Wash your body gently for five (5) minutes. Do not scrub your skin too hard. Do not wash with your regular soap after chlorhexidine (CHG) is used.
- 6. Turn the water back on and rinse your body thoroughly.
- 7. Pat yourself dry with a clean, soft towel.

Most pharmacies, Walmart, Target and grocery stores carry the Hibiclens brand of chlorhexidine (CHG).

Hibiclens will only be used the night before and morning of your surgery, Not AFTER.

## The Morning of your Surgery

❖ DO NOT EAT OR DRINK ANYTHING AFTER 12 AM (this includes gum and mints) \* Take only your necessary daily prescription medication with a small sip of water that have been cleared by your MD/RN

## **❖** ORAL HYGIENE

You may brush your teeth, but do not swallow the water.

#### CONTACT LENS

Do not wear them on the day of your procedure. Bring glasses with you if needed to sign the surgery paperwork.

#### CLEANSING

Once again, wash the surgical area/areas as instructed-**Do not use any make up, moisturizers, creams, deodorant, and lotions prior to arriving for surgery.** 

- **BODY PIERCINGS AND JEWELRY** Please **remove all piercings and jewelry** prior to arriving and leave at home. We are not responsible for any jewelry brought to the surgery center.
- CLOTHING Do not wear anything that must be pulled over your head!
  Wear comfortable, loose-fitting clothing, such as a full button down or zipper front shirt.
  Please wear slip on flat shoes. Remove hairpins, wigs or hair extensions and eyelash extensions.

## DO NOT BRING ANY VALUABLES WITH YOU!

#### CHECK IN/PREPARATION

YOUR SURGERY LOCATION IS:

Naples Plastic Surgery, 1250 Pine Ridge Road, Suite #101C, Naples, FL 34108

**YOUR ARRIVAL TIME IS:** 

## Please check in at the front desk in the Main lobby

Please know that your surgical arrival time is subject to change. Please plan your day to accommodate time changes if necessary.

(Patients under the age of 18 must be accompanied by a parent or legal guardian.)

YOUR FIRST POST-OP APPOINTMENT TIME IS:

8:00am the following morning (unless otherwise arranged)

## Medications for Surgery

\* Please bring all medications with you to surgery! \*

Antibiotic: This is the only medication that will need to be finished.
Keflex(Cephalexin) 500mg capsules: 1 capsule by mouth 2 times a day *Take one pill the night before surgery with dinner Do not take any Keflex capsules the morning of surgery. We will give you an antibiotic in your V.
Clindamycin(Cleocin) 300mg capsules: one capsule by mouth 4 times a day *Take one pill the night before surgery with dinner Do not take any Clindamycin capsules the morning of surgery. We will give you an antibiotic in your IV.
Nausea: Zofran (Ondansetron) ODT 4mg disintegrating tablet or 4mg tablet: Take one tablet by mouthe every 6 hours AS Needed for nausea.
Muscle Relaxer:  Robaxin (Methocarbamol) 750 mg tablets: 2 tablets three times a day AS Directed for muscle relaxation.
Pain: *Please eat carbohydrates prior to taking this medication *Drink Plenty of water to avoid dehydration.
□ Norco (Hydrocodone) 5mg/Tylenol 325mg 1-2 tablets every 4-6 hours AS Needed for pain □ Norco (Hydrocodone) 10mg/Tylenol 325mg tablets: 1-2 tablets every 4-6 hours AS Needed for pain
□ Nucynta (Tapentadol) 50mg tablet: 1 tablet by mouth every 4-6 hours AS Needed for pain. □ Tramadol 50mg tablet: 1-2 tablets by mouth every 4 hours AS Needed for pain.
Blood Pressure: (If you BP needs to be managed in Preop/Postop Phase)  □Clonidine 0.1: Take 1 pill 1 hour prior to arrival. Bring the remaining tablets.
Clonidine 0.2: Take 1 pill 1 hour prior to arrival Bring remaining tablets with

## \*\* We strongly suggest that IF you have High Blood Pressure: this should be managed by your PCP prior to surgery

Additional Supplies:( These can be purchased at	your Pharmacy or Amazon)
☐ Miralax, Senokot, Dulcolax (We recommend a stool softener when taking any pain medications.)	☐ Tylenol Rapid Release 500mg is a great drug to start when you stop your prescription pain medication.
☐ Hydrogen peroxide	☐ Preop Body Wash: Hibiclens for use below the neck procedures or Dial Antibacterial soap for above the neck procedures.
☐ Bacitracin Ointment (if not allergic)	
☐ 4x4 Gauze dressing sponges	
Other Items if needed:	
☐ Systane Eye Drops and Nighttime Protection-Eye	e surgery
☐ Puppy Pads-Liposuction	
☐ BBL surgery patients: Refer to your BBL informa	tion packet for additional instructions.
☐ Post TCA Peel/Dermabrasion Supplies	
☐ Afrin Nasal Spray and Saline Nasal Spray	
**Prescriptions will be electronically sent t hours prior to your sche	• •
TO ALL PATI	IENTS:
PLEASE BE ADVISED THAT IN COMPLIANCE WITH C	HAPTER 2018-13, LAWS OF FLORIDA (HOUSE

BILL 21), EFFECTIVE JULY 1, 2018, SCHEDULE II OPIOID PRESCRIPTIONS FOR THE TREATMENT OF

ACUTE POSTOPERATIVE PAIN WILL NOT EXCEED A 3-DAY SUPPLY

## Silagen-Arnica Bromelain Complex Tablets:

[This is given to you at your Pre-Op Appointment]

Silagen Arnica-Bromelain Complex comes in 28 tablets per bottle. This post procedure supplement contains Arnica Montana, Bromelain, Grapeseed Extract, high potency Vitamin C and Zinc, and Citrus Bioflavonoid Complex with Rutin, Hesperidin, and Diosmin. The first four ingredients are well known but the remaining three are less recognized by most patients. Diosmin and Hesperidin is helpful in reducing edema (swelling) and improving blood vessel strength. Rutin and Citrus Bioflavonoids along with Diosmin and Hesperidin helps reduce swelling and inflammation, increases lymphatic drainage, reduces pain, and improves venous tone and capillary strength. This vitamin, mineral and supplement composition provides all elements that are known today that may help with faster resolution of bruising and swelling which are the most visible part of the recovery process.

- Start taking it the next day after your surgery.
- You will take 2 tablets in the morning and 2 tablets at night until the bottle is empty.

# Talk to your health care provider about how to treat your pain. Create a safe and effective treatment plan that is right for you.

## **Alternatives to Opioids: Medications**

#### ADVANTAGES:

- Can control and alleviate mild to moderate pain with few side effects.
- Can reduce exposure to opioids and dependency.

## DISADVANTAGES:

- May not be covered by insurance.
- May not be effective for severe pain.



NON-OPIOID MEDICATIONS	DESCRIPTIONS, ADDITIONAL ADVANTAGES & <i>disadvantages</i>
Acetaminophen (Tylenol)	Relieves mild-moderate pain, and treats headache, muscle aches, arthritis, backache, toothaches, colds and fevers. Overdoses can cause liver damage.
Non-steroidal Anti-inflammatory Drugs (NSAIDs): Aspirin, Ibuprofen (Advil, Motrin), Naproxen (Aleve, Naprosyn)	Relieve mild-moderate pain, and reduce swelling and inflammation. Risk of stomach problems increases for people who take NSAIDs regularly. Can increase risk of bleeding.
Nerve Pain Medications: Gabapentin (Neuraptine), Pregabalin (Lyrica)	Relieve mild-moderate nerve pain (shooting and burning pain). Can cause drowsiness, dizziness, loss of coordination, tiredness and blurred vision.
Antidepressants: Effexor XR, Cymbalta, Savella	Relieve mild-moderate chronic pain, nerve pain (shooting and burning pain) and headaches. Depending on medication, side effects can include: drowsiness, dizziness, tiredness, constipation, weight loss or gain.
Medicated Creams, Foams, Gels, Lotions, Ointments, Sprays and Patches: Anesthetics (Lidocaine), NSAIDs, Muscle Relaxers, Capsaicin, Compound Topicals	Can be safer to relieve mild-moderate pain because medication is applied where the pain is. Anesthetics relieve nerve pain (shooting and burning pain) by numbing an area; NSAIDs relieve the pain of osteoarthritis, sprains, strains and overuse injuries; muscle relaxers reduce pain by causing muscles to become less tense or stiff; and capsaicin relieves musculoskeletal and neuropathic pain. Compounded topicals prepared by a pharmacist can be customized to meet a patient's specific needs. Skin irritation is the most common side effect. Capsaicin can cause warmth, stinging or burning on the skin.
Interventional Pain Management	Includes anesthetic or steroid injections around nerves, tendons, joints or muscles; spinal cord stimulation; drug delivery systems; or permanent or temporary nerve blocks.  Medicates specific areas of the body. Can provide short-term and long-term relief from pain. Certain medical conditions and allergies can cause complications.
Non-opioid Anesthesia	Opioids can be replaced with safer medications that block pain during and after surgery. A health care provider or an anesthesiologist can provide options and discuss side effects.

## **Alternatives to Opioids: Therapies**

## ADVANTAGES:

- Can control and alleviate mild to moderate pain with few side effects.
- · Can reduce exposure to opioids and dependency.
- Treatment targets the area of pain—not systemic.
- Providers are licensed and regulated by the State of Florida.\* (appsmqa.doh.state.fl.us/MQASearchServices)

## DISADVANTAGES:

- May not be covered by insurance.
- Relief from pain may not be immediate.
- May not be effective for severe pain.

Sources: American College of Surgeons, Centers for Disease Control and Prevention, National Institutes of Health, the Food and Drug Administration, Harvard Health and Wexner Medical Center (Ohio State University)

THERAPIES	DESCRIPTIONS, ADDITIONAL ADVANTAGES & <i>disadvantage</i> s
Self-care	Cold and heat: Ice relieves pain and reduces inflammation and swelling of intense injuries; heat reduces muscle pain and stiffness. Can provide short-term and long-term relief from pain. Too much heat can increase swelling and inflammation.  Exercise and movement: Regular exercise and physical activity can relieve pain. Simply walking has benefits. Mind-body practices like yoga and tai chi incorporate breath control, meditation and movements to stretch and strengthen muscles. Maintaining daily exercise and overcoming barriers to exercise can be a challenge.
Complementary Therapies	Acupuncture: Acupuncturists* insert thin needles into the body to stimulate specific points to relieve pain and promote healing. Can help ease some types of chronic pain: low-back, neck and knee pain, and osteoarthritis pain. Can reduce the frequency of tension headaches. Bleeding, bruising and soreness may occur at insertion sites.  Chiropractic: Chiropractic physicians* practice a hands-on approach to treat pain including manual, mechanical, electrical and natural methods, and nutrition guidance. Can help with pain management and improve general health. Aching or soreness in the spinal joints or muscles sometimes happens—usually within the first few hours after treatment.  Osteopathic Manipulative Treatment (OMT): Osteopathic physicians* use OMT—a hands-on technique applied to muscles, joints and other tissues—to treat pain. Clinically-proven to relieve low-back pain. Soreness or stiffness in the first few days after treatment is possible.  Massage therapy: Massage therapists* manually manipulate muscle, connective tissue, tendons and ligaments. Can relieve pain by relaxing painful muscles, tendons and joints. Can relieve stress and anxiety—possibly slowing pain messages to and from the brain. At certain points during a massage, there may be some discomfort—especially during deep tissue massage.  Transcutaneous electrical nerve stimulation (TENS): TENS is the application of electrical current through electrodes placed on the skin with varying frequencies. Studies have shown that TENS is effective for a variety of painful conditions. The intensity of TENS is described as a strong but comfortable sensation. Allergic reactions to adhesive pads are possible.
Rehabilitation Therapies	Occupational therapy: Occupational therapists* treat pain through the therapeutic use of everyday activities. Can relieve pain associated with dressing, bathing, eating and working. Therapy includes activities that increase coordination, balance, flexibility and range of motion. Therapy interventions and recommendations will not help if the patient does not practice as instructed.  Physical therapy: Physical therapists* treat pain by restoring, enhancing and maintaining physical and functional abilities. Therapy interventions and recommendations will not help if the patient does not practice as instructed.
Behavioral and Mental Health Therapies	Psychiatrists*, clinical social workers*, marriage and family therapists* and mental health counselors* provide therapies that identify and treat mental disorders or substance abuse problems that may be road blocks to pain management. When used to manage pain, these therapies can take time.

## GOING TO THE OPERATING ROOM

## THE DAY OF SURGERY

- When you arrive for surgery, we will have you change into a surgical gown, sign consents for your procedure, the doctor and the anesthesia provider will meet with you before you enter the operating room. This is the time for basic preparation such as marking the surgical area/areas and last-minute questions.
- Females of childbearing age will be asked to provide a urine sample to test for pregnancy upon arrival.
- If a change in your medical condition happens during surgery at 1250 Pine Ridge location, we will transfer you to NCH or Physicians Regional Medical Center

## THE RECOVERY ROOM

- ❖ When your surgery is completed and your dressings are in place, you will be taken to the recovery room. Fully trained recovery room nurses will be always with you.
- Your stay in the recovery room will last from one to two hours, depending upon the type of procedure, and how soon you are ready to leave. Most patients are fully awake within the first hour of recovery but may not remember much of their stay in the recovery room.

## ANESTHESIA & OTHER INFORMATION

Anesthesia Types: You will meet with our Anesthesia provider the day of your surgery and after reviewing your medical history they will determine the best type of anesthesia for you.

- o General Anesthesia: Total unconscious state with placement of a tube into the windpipe.
- Epidural with Sedation (Major Nerve Block): Is a numbing medication given by injection in the back.
   It numbs or causes a loss of feeling in the lower half of your body. This is used in combination with Deep Sedation.
- Deep Sedation: Medication given through your IV to keep you asleep and comfortable. You will not
  wake up during your procedure. You will be breathing on your own and we will supplement you
  with oxygen.
- ❖ Once brought into the operating room and you are settled on the operating table, you will be connected to several monitors and an IV catheter. A quick-acting sedative will be given through the IV after you have breathed pure oxygen for a few minutes. The selected anesthesia will begin.
  - The current level of sophistication of anesthesia monitoring equipment is routinely maintained and is of the same equipment in any major hospital. Your anesthetist will discuss the specific risks of anesthesia with you before your surgery.



# DEEP VEIN THROMBOSIS

Tips for Healthy Living.

## Tips to Help Prevent Deep Vein Thrombosis (DVT)

- Move around as soon as possible after having been confined to bed, such as after surgery, illness, or injury.
- 2. If you're at risk for DVT, talk to your doctor about
  - Graduated compression stockings (sometimes called "support hose" or "medical compression stockings").
  - Medication (anticoagulants) to prevent or treat DVT.
- 3. When sitting for long periods of time, such as when traveling for more than four hours:
  - Get up and walk around every 2 to 3 hours.
  - · Exercise your legs while you're sitting by:
    - · Raising and lowering your heels while keeping your toes on the floor
    - Raising and lowering your toes while keeping your heels on the floor
    - Tightening and releasing your leg muscles
  - · Wear loose-fitting clothes.
  - Drink plenty of water, and avoid drinking anything with alcohol or caffeine in it.
- 4. Exercise regularly, maintain a healthy weight, and don't smoke.

For more information, please visit www.cdc.gov/ncbddd/dvt

National Center on Birth Defects and Developmental Disabilities Tip Sheet Series

## **POSTOPERATIVE CARE**

#### ❖ VERY IMPORTANT

If you have excessive bleeding or pain, please notify us immediately!

If it is past office hours or on weekends, you may reach the doctors on their cell phones for any questions or concerns regarding your surgery. Emails are not always monitored! Business hours are Monday-Thursday 8am-4pm and Friday 8am-12pm.

If you prefer email the nurse/medical assistant questions, please use the e-mail addresses below:

Dr. Gardner Cell: (239) 877-2239, Nurse Lisa: LisaS@naplesps.com Dr. Baccaro Cell: (559) 906-2757, Nurse Lisa: LisaS@naplesps.com

Dr. Walsh Cell: (404) 909-7420, Medical Assistant Jocelyn: Jocelyn@naplesps.com Dr Bonett Cell: (864) 293-2084, Medical Assistant Maricet: Maricet@naplesps.com

\*Universal Text Line for Photos: (239) 579-3757

#### ❖ YOUR FIRST 24 HOURS

When discharged from surgery, a responsible adult must pick you up since you have been sedated and are unable to drive. A responsible adult must stay overnight with you. Uber drivers or taxis are not acceptable forms of transportation after surgery. If you have any questions about these matters, please ask us.

#### SHOWERING

#### **❖** DRESSINGS

Keep your dressings as clean and dry as possible. Do not remove them unless instructed.

#### **♦** ACTIVITY

Take it easy and pamper yourself. Try to avoid any strain. You may go to the bathroom, sit, and watch TV, etc., But **NO MATTER HOW GOOD YOU FEEL, DO NOT OVER DO IT!** We do not want you to bleed and cause any more swelling and bruising than is unavoidable.

#### ❖ TRAVEL

You will need to be in town for the first 6 weeks following your surgery unless you have been approved to travel prior.

#### ◆ DIET

As tolerated, including lots of fluids, water, and fruit juices. If nausea is severe, use the prescription provided. If you feel normal, start with liquids and bland food, and if those are well tolerated, progress to a regular diet.

#### SMOKING

Smoking reduces capillary flow in your skin. You must **not** smoke at all during the first month following your surgery.

#### ❖ ALCOHOL

Alcohol dilates the blood vessels and could increase postoperative bleeding. Please do not drink until you have stopped taking prescription pain pills, as the combination of pain pills and alcohol can be dangerous.

## ◆ DRIVING

Please do not drive for at least **4 days** after general anesthesia or intravenous sedation or while taking prescription pain pills. Keep in mind that you must make full use of your reflexes. If pain inhibits them, don't drive! Of course, all these suggestions dependent upon the surgical procedure that was performed.

❖ POSTOPERATIVE APPOINTMENTS It is very important to follow the schedule of appointments we establish after surgery.

Dr. Gardner has privileges at Naples Community Hospital to perform the same procedures that are being performed in the out-patient setting of 1250 Pine Ridge Road, Suite 101C, Naples, FL 34108.

Dr. Baccaro has privileges at Naples Community Hospital to perform the same procedures that are being performed in the out-patient setting of 1250 Pine Ridge Road, Suite 101C, Naples, FL 34108.

Dr. Walsh has privileges at Naples Community Hospital and Physicians Regional Medical Center to perform the same procedures that are being performed in the out-patient setting of 1250 Pine Ridge Road, Suite 101C, Naples, FL 34108.

Dr. Bonett has privileges at Naples Community Hospital and Physicians Regional Medical Center to perform the same procedures that are being performed in the out-patient setting of 1250 Pine Ridge Road, Suite 101C, Naples, FL 34108.

**Please note**- you will need a responsible adult to be with you for at least 24 hours following surgery. We strongly encourage patients who are having a long surgery, or who do not have help at home, to consider staying overnight with our RN in our overnight suite. Please contact us if you would like more information about this.

## **Over Night Suite Pricing Information:**

Facility Fee: \$300.00 (This is paid to Naples Plastic Surgery at your pre-op visit.)

## Nurse Fee: \$65/hour. (Your overnight stay can be 14-16 hours)

(This is paid directly from the patient to the nurse and is due the morning after the surgery with a check.)

## Bring a blank check with you to surgery.

If staying the night, please consider bringing your phone, iPad and charger.

\*\*\*\*Bring beverages and snacks that you like\*\*\*\*

Concierge nursing at home: Olivia Sainz RN

#### Investment:

24 hours of care @ \$65/hour 12 hours of care @ \$65/hour

Contact: Olivia Sainz, RN <u>flafirstchoicenursing@gmail.com</u> 239-503-0075

## **Important Notice:**

Your doctor will be unavailable during the dates of:

Please know that we will have one of our other plastic surgeons covering during this time frame for any needed appointments.

## LONG TERM POST-OPERATIVE INSTRUCTIONS

## **♦** ACTIVITY/SPORTS/SWIM

Can you resume "light walking" for the first 2 weeks postop. We do not want you to increase your heart rate during these walks.

We want you to avoid straining or any aerobic activity for at least 3 weeks after surgery. This is to avoid bleeding, bruising, and swelling. Do not resume strenuous exercise for 4-6 weeks.

We will have you avoid Golf, Tennis, Pickleball, Yoga or weight training for 6 weeks. Your surgeon will let you know when it is safe to resume these activities.

Do not go into the pool or the ocean for 6 weeks and with the doctor's permission to do so. We will give you clearance to increase your activities according to the progress of your recovery.

## **❖** SUN EXPOSURE

If fresh scars are exposed to the sun, they will tend to become darker and take longer to fade. Sunscreen can help. Take extra care and precautions if the area operated on is slightly numb. You might not feel a sunburn develop!

Scar care will be discussed upon wound healing, around 2 weeks post op.

#### **❖** WORK

Follow whatever plan you and your doctor have agreed on.

## **AS YOU HEAL**

## DEPRESSION

Some patients experience a brief period of let-down or depression after surgery. Some may subconsciously have expected to feel and look better instantly, even though they rationally understand that this will not be the case. Patients commonly question their decision to have surgery during the first few days after surgery. As the healing occurs, these thoughts usually disappear quickly. If you feel depressed, understanding that this is a natural phase of the healing process may help you cope with the emotional state.

We thank you for putting your trust in the staff and doctors at Naples Plastic Surgery! All patients will receive a lifetime 20% discount on any future Botox/Injectable/Skin Care products to show our appreciation.

Please take some time to review this packet of information when you are home and review this information with your caregiver.

## Notes:

## Notes:



