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**Rhinoplasty/Septoplasty Surgery Postoperative Instructions**

The following instructions are based on Dr. Egan's experience with many rhinoplasty/septoplasty operations. This handout is designed to answer the most commonly asked questions following surgery of the nose; it is not intended to provide answers to every question or situation that may arise. Attempt to follow the instructions faithfully. Those who do so generally have the smoothest postoperative course.

Planning Before Surgery

* Schedule your postoperative visit for 7 days after your surgery.
* Arrange to have frozen pea packs available for your use for at least the first 24 hours after discharge from the hospital (see "Frozen Pea Packs" below).

Immediately Following Surgery
You will awaken in the Post Anesthesia Care Unit (PACU). In the PACU, a team of highly-skilled nurses will assist you through the first stages of your recovery. You can expect to have cool compresses on your eyes and cheeks to reduce any swelling or bruising that may occur following surgery. Your nose will be blocked as a result of swelling from the surgery and nasal splints. For this reason, you must remember to breathe through your mouth. You can expect to stay in the PACU for 1 to 2 hours until the nurses and physicians feel it is safe for you to be discharged.

Nasal Septal Splints
Nasal septal splints (usually made of sterile Teflon™ sheeting) keep the septum straight while it heals in its new shape. Splints are removed 7 to 14 days after surgery. This process is very simple and involves no discomfort.

Nasal cast

A protective nasal cast may be placed on the outside of your nose. This will protect the nose from being hit and moved accidently during sleep or activities. It will be removed by Dr. Egan in 7 days.

Swelling / Discoloration
Every operation, no matter how minor, is accompanied by swelling of the surrounding tissues. The amount varies from person to person, but it always seems more dramatic in the face. We suggest that you keep your head elevated as much as possible. The swelling itself is normal and is not an indication that something is wrong with the healing phase of your operation.

Your nose and eye area may remain swollen with varying amounts of discoloration for several days. The most important thing to remember is that these conditions always subside. Some tips to shorten the duration of the swelling include:

1. STAY VERTICAL. **THIS IS VERY IMPORTANT!** Sit, stand and walk around as much as is comfortable beginning on your second postoperative day. Of course, you should rest when you become tired but keep your upper body as upright as possible.
2. APPLY COLD COMPRESSES for a minimum of 24 hours after your return home from surgery. (See "Frozen Pea Packs" below)
3. AVOID BENDING OVER OR LIFTING heavy things for one week. In addition to aggravating swelling, bending and lifting may elevate blood pressure and start bleeding.
4. AVOID HITTING OR BUMPING YOUR NOSE. It is wise not to pick up small children and you should sleep alone for one week after your operation.
5. SLEEP WITH THE HEAD OF THE BED ELEVATED 45 DEGREES for 1-2 weeks following your surgery. To accomplish this, place two or three pillows under the head of the mattress and one or two on top of the mattress. It is recommended that you sleep on your back for 30 nights. Some patients find a reclining chair placed at a 45-degree angle to be more comfortable than a bed.
6. AVOID STRAINING DURING ELIMINATION. If you need a laxative, we recommend Correctol™ (available without a prescription at any pharmacy). Proper diet, plenty of water and walking are strongly recommended to avoid constipation.
7. AVOID SUNNING of your face for one month. Ordinary sun exposure is not harmful but always use a sunscreen with SPF15 or above.
8. AVOID STRENUOUS EXERCISE for one week following surgery.

It is not unusual to have varying amounts of discoloration in the nose and eye area. Like the swelling, it may become more pronounced, especially in the eye area, after the first day or so. Remember this is normal and temporary. It usually lasts no more than two weeks, all the while decreasing in intensity. The measures previously described that help the swelling to subside will also help diminish discoloration; however, there is no medication that will cause it to disappear rapidly - only the natural course of time.
You can camouflage the discoloration to some extent by using make-up. If you have external incisions, do no apply make-up over the incisions themselves until one day after the sutures have been removed; however, you may bring make-up to the line of the incisions.

Nasal Drainage Or Bleeding
You should expect some blood-tinged drainage from your nose following any nasal surgery. The hospital nurses will place a drip pad under your nose when you are discharged from the hospital. This drip pad should be changed whenever it becomes soiled. If you develop active bleeding from the nose, spray each nostril 4 to 6 times with a decongestant nose spray such as Afrin™ or Neosynephrine™ and apply gentle external pressure to the lower portion of your nose. You may repeat this maneuver every 10 minutes for up to 30 minutes. If bleeding continues despite these steps, call Dr. Egan's office.

Frozen Pea Packs
Frozen English peas (from your grocer), placed in ZipLock® bags, provide the simplest and most effective cold compresses to reduce swelling, bruising, and discomfort following surgery. During your waking hours, apply the pea packs to the cheek and eye area around your nose for 20-30 minutes each hour for at least 48-hours following surgery. You may continue to use the pea packs as much as you like for up to 7 days after your surgery.

Pain Medications
Even though you may not feel much initial discomfort following your surgery, pain medication should be taken as prescribed by Dr. Egan, every 6 hours for the first 24 to 36 hours after surgery. We find that many patients initially feel very well following surgery and are reluctant to take any medication for symptoms of pain. Unfortunately, the patients who "tough it out" often develop discomfort 18 to 24 hours after the procedure, which may then last for 3 to 4 days. Those patients who take their medicines faithfully, as instructed, have very little, if any, discomfort. Beginning 36 to 48 hours after surgery, Tylenol® or Extra Strength Tylenol® is usually adequate for any discomfort you may still experience.

Antibiotics
You will take an oral antibiotic for 7 to 10 days following your surgery. All antibiotics should be taken with food or liquids to prevent nausea and promote proper absorption of the medication (do not consume milk or dairy products when taking your antibiotic as they can inactivate many medicines). Take your antibiotic as instructed by your physician until medication is completely gone. Do not forget to take your antibiotic and do no stop taking it because you "feel better."

Temperature
Generally, the body temperature does not rise much above 100 degrees following nasal surgery. If you have a persistent temperature above 101.5 degrees that is not relieved by Tylenol®, call Dr. Egan's office.

Weakness
It is not unusual for a patient to feel weak, have palpitations, break out in "cold sweats," or get dizzy following any type of surgical procedure especially when anesthesia has been administered. Within a few days these feelings will generally disappear without medication. Returning to a normal diet and light activity will shorten the duration of these feelings.

Resuming Activities

1. DO NOT SMOKE & AVOID ALCOHOL CONSUMPTION for 3 weeks. Both of these activities significantly slow the healing process.
2. WEARING GLASSES AND CONTACT LENSES. Eyeglasses should not be supported by the nose for at least one month after surgery. Eyeglasses may be taped to the forehead or a device called a "cheek rest" may be purchased to clip on to your glasses. (These steps are taken to avoid any external forces being applied to the nose which may result in a change in its new shape and function). Contact lenses may be inserted the day after surgery, if no eyelid surgery was performed.
3. HOUSEHOLD ACTIVITIES. On your second postoperative day, you are encouraged to be up and around the house with your usual activities; however, no bending, no heavy lifting, and no strenuous activity for 1 week.
4. PULLOVER CLOTHING. For 1 week following surgery, you should wear clothing that fastens either in the front or at the back rather than the type that must be pulled over the head.
5. ATHLETICS. No strenuous athletic activity or exercises that involve straining or heavy lifting for 1 week following surgery.
6. RETURNING TO WORK AND RESUMING SOCIAL ACTIVITIES. When you return to work depends on the amount of physical activity and public contact your job involves and also the amount of swelling and discoloration you develop; the average person is ready to return to work or go out socially 1 week after surgery.
7. DO NOT DRIVE A CAR for one week. Also, do not drive while taking any sedative or prescription pain medications.

Postoperative Appointments
Your first postoperative appointment will occur 1 to 4 days after your surgery and should be scheduled before your surgery or at the time of your preoperative visit. Your second postoperative visit will be 14 to 21 days after your surgery and will be scheduled at the time of your first postoperative visit. If your appointment is not made while you are in the office, please call during regular office hours (9:00 a.m. to 5:00 p.m., Monday through Friday) to schedule a mutually convenient time.

Summary
Remember the things you were told before surgery:

1. Your nose and eye area will appear swollen and there will be varying amounts of discoloration. This swelling will subside, to a very large extent, within two weeks; however, it will take 6-8 weeks for all the swelling to totally disappear and for your nose to reach its final contour.
2. The discoloration will gradually disappear over a period of 10-14 days, in most cases. We have yet to encounter a case where it persisted permanently.
3. Call Dr. Egan's office if you experience:
	* a persistent temperature above 101.5 degrees that is not relieved by Tylenol®
	* active, persistent bleeding not resolved by decongestant spray treatment
	* discharge from the nose or other evidence of infection