

LABIAPLASTY POST OPERATIVE INSTRUCTIONS

ITEMS TO PURCHASE BEFORE SURGERY:

1. **Maxi pads/panty liners.** These will help to absorb any fluid that may be seeping from the incisions (which is normal).



2. **Stool softener/laxative** (Peri-Colace)—Pain medication can constipate you. Peri-Colace helps soften the feces ("the mush") and also helps stimulate the bowels ("the push"). These can be started 2 days prior to surgery to help "prep" the bowels and should be continued after surgery as long as you are taking narcotics.
3. **Extra-Strength Tylenol (500mg):** To be used when pain is mild to moderate in place of the narcotic pain medication.
4. **ArniKa and Bromelin:** These are herbal supplements that aid in bruising and swelling. This supplement will be provided at your pre-operative appointment. You can begin these supplements 2-3 days before surgery and use them for 2 weeks after surgery.
5. **Flowy skirts or maxi dresses:** This will allow the surgical site to breathe.
6. **Compression stockings:** We will provide you with 1 pair of compression stockings immediately after surgery. Please plan to purchase an additional pair at Target ® if your socks become soiled or are uncomfortable. They will need to be worn for 5 days postoperatively.
7. **Oral Thermometer:** It is important to monitor your temperature after surgery if you feel "feverish" or hot. You have a fever if you have a temperature above 101.5.
8. **Peri Wash Bottle:** This will help cleanse the area without having to aggressively wipe the area potentially interfering with the sutures. Gentle and soothing.



WHAT TO EXPECT AFTER SURGERY

- Abdominal bloating is to be expected in the early postoperative period (even if this is not the area of treatment). Bloating results from sodium present in your medications and in the anesthesia.
- Most patients report difficulty sleeping and difficulty with pain management the first night after surgery. This is usually secondary to the effects of anesthesia and should subside within 24-48 hours. However, sleep can be affected for several days following major surgery for many people.
- Bruising and swelling is to be expected post operatively. This will gradually resolve over the next two weeks.
- To alleviate any discomfort and reduce swelling, you may apply cool, not cold compresses to the treated area. Frozen bags of peas and corn work well; make sure to wrap in a towel before applying to the skin. Apply cool compress for no longer than 10 minutes at a time.
- Seepage and drainage, often blood-tinged, from incision sites is expected for the first 1-2 weeks.
- A burning sensation (raw, sensitive) or sharp shooting pains along the surgical area and incision line is normal and indicative of nerve regeneration. These “neuralgias” will burn out by 9 months.
- Numbness is expected to resolve by 9 months on average.
- Shiny, itchy skin due to swelling. If this occurs, an OTC antihistamine such as Benadryl can help alleviate symptoms.
- It takes **6 MONTHS FOR FINAL RESULTS** to appear. In the interim, you may notice:
 - Incision asymmetry
 - Labia asymmetry
 - Pleating along your incision line
 - Swelling changes from day-to-day.
 - Be patient please and try not to focus on these issues before the 6-month period.
- ***Consistent, sharp pain that is unrelieved by pain medication and/or repositioning should be reported to our office immediately.***

PLEASE CALL THE OFFICE AT (972) 930-0333 IF:

- You have redness, increased pain at surgical incision sites, sudden increase in swelling, warmth, drainage (pus), or oral temperature greater than 101.5°F

PRE/POST OPERATIVE MEDICATIONS

1. **Celebrex 400mg**
2. **Gabapentin 300mg**
 - a. You will receive a prescription of each of these. The prescription will have one pill each.
 - b. You will take these two medications the morning of surgery prior to coming to the office with a small sip of water.
3. **Norco (pain medication):** see below.
4. **Zofran (nausea) 4mg 1 tab every six to eight hours as needed for nausea.** Start after discharge.

5. Silagen Arnica -Bromealin Supplements:

- a. A unique formulation that is clinically proven to speed the healing time up to 50% allowing for faster recovery from bruising, swelling, and pain associated with surgical procedures.
- b. Start 2-3 days prior to surgery with 1 tab in the morning and 1 tab at night. You can continue this after surgery when you are actively bruised and swollen.



Notes on Pain Medication:

- Take pain medication with food.
- Norco (Hydrocodone + Acetaminophen) should be taken as directed:
 - Mild to moderate pain: 1 tablet every 4 – 6 hours as needed
 - Severe pain: 2 tablets every 4 – 6 hours as needed.
- If your pain is mild, or if you do not like the effects of the narcotics, you can take Tylenol® (Acetaminophen) 1000mg every 8 hours (which would be 2 tablets of the Extra Strength Tylenol®, purchased over the counter). Please do not exceed 3000mg in a 24-hour period. Please do not mix the Tylenol® with the narcotic pain medication since the narcotic pain medication consists of 325mg of Tylenol®.
- We will provide every patient with 1 refill of the pain medication if needed one week after the last prescription was filled. No additional refills will be provided.
- If you are to finish your pain medication during a weekend or after hours, you will need to wait until regular business hours to request additional pain medication.
- If you are under the care of a pain management provider or already take narcotic pain medication, our office **WILL NOT** be providing you with an initial RX or refill for the aforementioned. It is your responsibility to obtain the necessary medications/refills from your prescribing provider. Please make sure to bring the necessary medications if you are visiting us from out-of-town as we will not be providing it.
- Our office will not be providing any additional medications that are unrelated to the surgical site (i.e., blood pressure meds, muscle relaxers, etc.). Should you require these in the postoperative period, you will be responsible for acquiring them from your primary care provider.
- Take a stool softener with pain medication to prevent constipation.

- **DO NOT DRIVE WHILE TAKING PAIN MEDICATION.** These medications can result in drowsiness. If you are pulled over while driving under the influence of narcotics or scheduled substances, you will get a DUI!
- **DO NOT DRINK ALCOHOL WHILE TAKING PAIN MEDICATIONS.** This can be a deadly combination.
- Only take the narcotic pain medication if needed. The quicker you can wean off the pain medication, the better you will feel and heal.

IMPORTANT POINTS TO REMEMBER TO HELP WITH POST OPERATIVE RECOVERY

REMEMBER THE FIVE W'S

- The most common cause of an elevated temperature/fever after surgery is due to collapse of the lungs (atelectasis). This is a normal occurrence because of anesthesia and the physical stress your body is undergoing. To decrease your body temperature and expand the lungs, it is important to do the following:

- Wind: Take 10 deep breaths per hour for the first 72 hours.
- Water: Dehydration can also cause an increase in body temperature. It is important that you remain hydrated since surgery can deplete your body of water. 64 ounces of water a day is encouraged.
- Walk: Get up and walk once every hour to keep your blood moving. This is key for preventing a blood clot.
- Wonder drugs: Take your pain medication or Tylenol® as needed. An increase in pain can cause an increase in body temperature.
- Wound: Observe the wound for redness, heat, discharge (pus), and openings.

HAVE SOMEONE WITH YOU

- After surgery, have an adult available to stay with you for the first 72 hours, as you will be weak and drowsy.
- It is highly recommended that you have an adult with you for the duration of your stay if you are an out-of-town patient.

COMPRESSION STOCKINGS/TRAVELING

- **Compression Stockings:**
 - If compression stockings were provided, please leave the stockings on for 5 days after surgery. They may be removed when showering but must be replaced after your shower. You can also purchase additional compression socks at Target® if needed if the ones provided in surgery are too large or too small or become soiled.
- **Traveling:**
 - If you are an out-of-town patient and will be traveling back home after your surgery, please wear your compression stockings on the plane or in the car and remove them after landing.

- When traveling, please be sure to get up every hour to walk around and encourage blood-flow in your legs. Also, be sure to wiggle your ankles when sitting as if pressing a gas pedal to promote blood flow.
- It is safe to fly 1 week after surgery if you have been cleared to do so.
- If you experience shortness of breath after a flight or leg pain with extreme leg swelling, please visit an Emergency Department immediately to rule out a blood clot.

DO NOT SMOKE. This is very important!!!

- Smoking (tobacco, marijuana, or vapes) can result in a lack of blood supply to tissues and fat causing tissue death or delayed wound healing. Even 0% nicotine vapes contain a trace amount of nicotine that the FDA accepts as 0%.
- Do not allow those caring for you to smoke around you as second-hand smoke can be detrimental to your recovery.
- No need to resume smoking as you have stopped six weeks before surgery. This is a benefit to your overall health.

SUPPLEMENTS

- Do not take aspirin (or products containing aspirin), anti-inflammatories, or Ibuprofen (Advil®, Motrin®, Midol®) for 1 week after surgery. Also do not begin herbal supplements until 1 week after surgery.
 - Arnika, Bromelin and Vitamin C are okay to take.
- Phentermine or appetite suppressants should not be taken until 6 weeks after surgery as these supplements increase heart rate and blood pressure and can interfere with your recovery.

WALKING

- It is important to get out of bed early and often after your surgery (with assistance) to prevent postoperative problems. Walking encourages blood flow throughout your legs to reduce the chance of blood clot development.
- IF YOU HAVE SHORTNESS OF BREATH, LEG SWELLING, AND/OR LEG PAIN AT ANY POINT IN YOUR POSTOPERATIVE HEALING, GO TO AN EMERGENCY DEPARTMENT IMMEDIATELY (OR CALL 911) AS THIS COULD SIGNIFY A BLOOD CLOT.

POSITIONING

- Avoid prolonged sitting as this adds pressure to the surgical site and can possibly increase swelling.
- Allow the area to “air dry” as much as possible. This allows the area to breathe.

CLEANSING/SHOWERING

- You may shower (but not bathe) 48 hours after surgery. Some patients do not feel up for showering at 48 hours and choose to wait until the 3rd day.

- Make sure someone is with you at your first shower. You can expect some dizziness with your first shower. Make the shower a quick one.
- You may wash the surgical area with a mild soap and water (lukewarm, never hot). Do not use surgical soaps to wash the area as these are drying to the skin. Use regular soap.
- After using the toilet, use a peri bottle to cleanse the area. Pat the area dry with a clean towel or gauze. Do not rub. Do not use toilet paper as it can break apart easily and remain in the surgical area.
- You will likely need to wear a pad/panty liner for approximately two weeks to help with spotting.

DIET

- A light diet is best after surgery. Begin by taking liquids slowly and progress to soups or Jell-O. You may start a regular diet the next day.
- Though it is impossible to get rid of gas entirely, there are strategies to reduce it. Eat and drink slowly, chew thoroughly and cut down on carbonated drinks. Avoid sugar-free gums and sugar-free candies that contain sorbitol or zylitol – both sweeteners are poorly digested and can result in bloating.
- Stay on a soft diet, high in protein, for 2 – 3 days and avoid spicy food which can cause nausea and gas. Then you may resume a normal, high protein diet.

EXERCISE AND SEXUAL ACTIVITY

- No overheating for the first 3 weeks (spas, exercising in the sun, etc).
- Elevating the heart rate, i.e., brisk walk/treadmill may begin starting at 2 weeks. Followed by focused lower body exercises at 3-4 weeks. Your normal exercise routine can resume at 6 weeks post operatively.
- At 4 weeks, you can consider passive or less vigorous sexual activity.
- You may begin swimming 4 weeks post-operatively if healing is complete. We advise to wait a full 6 weeks before swimming in a lake or ocean.

SUTURES

- There will be a scar on the inside of the labia. These sutures are dissolvable.
- Do not apply anything on your incisions for 3 weeks unless told to do so. Keep the incisions clean and dry.
- Every patient will have additional layers of dissolvable sutures under their skin. These dissolvable sutures (Monocryl sutures) can take up to 8-12 weeks days to absorb under the skin. On occasion, you may see or feel what seems to be a fishing line material protruding from the incision. If this should happen to you, please trim the clear stitch at the skin using sterile scissors or plan to visit our office (or your local provider) so that it can be removed.

FOLLOW UP APPOINTMENTS

- It is important to be seen by our office for your post-op checks.
- Dr. Setty will see you at the following follow-up appointments: one week, six weeks, six months and one year.
 - 1 Week Post Operative Appointment
 - Dressing change (if needed)
 - Observe tissue for necrosis or wound separation
 - 6 Week Post Operative Appointment
 - Assessment of area
 - Post operative photos started.
 - 6 Month Post Operative Appointment
 - First conversation regarding aesthetic results/concerns.
 - Measurements and post operative photos.
 - One Year Post Operative Appointment
 - Final conversation regarding aesthetic results/concerns.
 - Remember your body will change with age which also means the appearance of your labia will change with time too. You may wish to undergo revision surgery later to help maintain your appearance throughout life. Contact our office with any of your questions or concerns, at any time.
- RN will see you at the following appointments: three-week, three-month.
 - 3 Week Post Operative Appointment
 - Assessment of surgical site.
 - 3 month Post Operative Appointment
 - Post operative photos.
- *It is strongly advised that you stay locally for the first week following surgery if you are an out-of-town patient.*
- It's important to keep in mind that these appointments are patient-specific and may vary depending on your own individual healing and/or complications.
- If you are from out-of-town and cannot attend appointments at the recommended frequency, then it is strongly advised that you establish a relationship with a provider in your hometown who can follow your progress or evaluate you in case of infection. Virtual appointments may be scheduled when unable to attend in-person appointments.
- Follow up appointments can be made while at your scheduled post operative appointment or you can call the office at (972) 930-0333. Our office hours are Monday – Thursday 8:00 AM - 4:00 PM and Friday 8:00 AM – 3:00 PM. The office is closed on Saturday and Sunday.
- **The office is closed on Saturday and Sunday. Should you experience a complication over the weekend, call the regular office line at (972) 930-0333 and you will be directed to an afterhours line or if it is a life-threatening emergency, please visit the nearest urgent care/ER.**

PLEASE VISIT AN EMERGENCY ROOM OR CALL 911 IF:

- At any point you experience shortness of breath or leg pain with swelling as this could indicate a pulmonary embolism (blood clot in lung) or DVT (blood clot in legs) and could be deadly if untreated.

IMPORTANT POINTS OFTEN OVERLOOKED ABOUT SURGERY

• It is not unusual for patients to undergo significant emotional “ups and downs” after any type of surgery. Factors such as underlying stress, medications, and/or psychological tendencies can result in patients experiencing a “post operative depression” that generally resolves after a few weeks. Having a partner, family member, or friend who is supportive can help with this process. Understanding the stages of emotional “ups and downs” can help patients stay calm and recover from this emotional process faster:

- Phase 1: Being Out of It
 - Swelling and discomfort is most severe over the first few days after surgery. Pain medications also can make you disoriented and emotional.
- Phase 2: Mood Swings
 - Having just had surgery, patients are adjusting to a sudden change in their appearance with much anticipation. The presence of bruising, swelling, and asymmetries will distort a patient’s results thereby concealing the final outcome. Mood swings (especially sadness), worry and depression are common emotions as a result. Patients may even ask, “What have I done?” or think that “I never should have done it.”
- Phase 3: Being over critical
 - During the second week, patients will probably be feeling a lot better. The swelling and muscle cramping/spasms will be decreasing, and sutures will be out. Because of anticipation, it is natural for patients to look critically at their new body worrying about symmetry, scars, and so on. At this point, it’s normal to wonder if they have achieved their goal and what they paid for. This is too soon to tell, and most concerns are resolved with time.
- Phase 4: Happy at last
 - Finally, about 3 – 6 months out of surgery, patients will probably start liking how they look and are feeling much better. They may be in the mood to check out some bathing suits or outfits to show off their new figure.