

Rhinoplasty

Pre & Post Operative Instructions (including Rhino Revisions)

Understanding your Surgery with General Anesthesia

- General Anesthesia:** This type of anesthesia renders you completely unconscious during the procedure, ensuring you feel no pain and have no memory of the surgery. It is typically used for more extensive operations and requires careful monitoring by an anesthesiologist.
 - **Instructions:** Nothing to eat or drink 8 hours before surgery. This includes water, mints, candy, or gum.
 - **Post-Surgery Transportation:** It is mandatory to arrange for a ride home from surgery with a family member or friend. Patients may not use taxis or Ubers.
 - **Why?:** After surgery, especially with general anesthesia, it's important for your safety to have someone responsible to take you home and provide care for at least 1-2 days. This ensures that you have the necessary support during the initial critical recovery period. If you do not arrange for transportation and care for at least 1-2 days, then your surgery may be canceled, at your expense.

Shopping List

- Tylenol (Acetaminophen):** Alternative to narcotic pain medication if pain is not severe. Do NOT take NSAIDS (such as Ibuprofen & others).
- Straws:** While optional, straws will aid in maintaining good hydration after surgery.
- Vaseline Ointment:** Used to keep the nose well lubricated. (May use Aquaphor or Non-Petroleum Jelly)
- Simply Saline OR Pretz Saline:** Start using 10 days after surgery to improve breathing. DO NOT USE MEDICATED DECONGESTANT NASAL SPRAYS.

Pre-Operative Instructions

Medication Management Before Surgery: Guidelines for Minimizing Bleeding Risks

These are general recommendations. For more information please refer to the email: Preoperative Instructions for Your Upcoming Surgery &/or contact our office for a safe plan tailored to your health needs and surgical procedure

- **Aspirin and NSAIDs:** Please discontinue use at least 3 weeks before your surgery, unless otherwise directed by your surgeon.
- **Anticoagulants (Warfarin, Heparin, Direct Oral Anticoagulants):** The discontinuation schedule varies. Please consult your surgeon at least 3 weeks before surgery to discuss a tailored plan, which may include temporary adjustments to your regimen or bridging therapy.
- **Herbal Supplements and Vitamins:** Discontinue any herbal supplements and vitamins that can increase bleeding risk, such as vitamin E, fish oil, ginkgo biloba, and garlic, at least 2 weeks prior to surgery.
- **ADD / ADHD medications** are to be avoided the day before surgery.
- **Contrave (Naltrexone-containing meds):** Patient must consult with the prescribing physician about when & how to stop this medication prior to surgery.
- **Weight Loss Meds (Ozempic, Wegovy, Semaglutide, ect.), & Biotin.:** are to be stopped 2 weeks prior to surgery.
- **Illicit Drug Use:** Please be honest about any illicit drug use during the preoperative assessment. Your safety is our priority and accurate medical information is crucial for planning a safe and effective surgical procedure.
 - Illicit drug use can have significant interactions with anesthesia and other medications administered during surgery, potentially leading to complications.
 - **Examples of the most important substances to mention include:**
 - Cocaine & Meth.

Consultation Is Key: If you are taking any of the above medications or supplements for chronic conditions, do not stop them without first consulting with the physician who prescribed them and your surgeon.

Together, we will develop a safe plan tailored to your health needs and surgical procedure.

4 Weeks Before Surgery

- **Reducing/Stopping Nicotine:** We strongly recommend reducing or ideally stopping nicotine (including cigarettes, oral tobacco, e-cigarettes with nicotine, patches, lozenges, and/or gums) for 4 weeks before and after your surgery.
 - **Why?:** Nicotine can significantly hinder your healing process and increase the risk of complications. Nicotine constricts blood vessels, which can impair blood flow to the surgical area, affecting healing and recovery. Any reduction in nicotine exposure is beneficial and contributes positively to your surgical outcome.

2 Weeks Before Surgery

- **Alcohol Consumption:** We encourage patients to reduce or stop alcohol consumption for at least 2 weeks before and after surgery.
 - **Why?:** Alcohol can increase the risk of bruising, swelling, and can prolong the healing process. Reducing alcohol intake, even if complete cessation is challenging, but can significantly improve your recovery experience.

The Day of Surgery: Your Preparation Guide

On the day of your surgery at Asia Pacific Surgery, we prioritize your comfort, safety, and the success of your procedure. To help everything go smoothly, please follow these guidelines carefully:

- **Shower or Bath:** On the day of surgery, please take a shower or bath using soap (either antimicrobial or non-antimicrobial).
 - **Avoid Applying Products:** Do not apply any lotions, perfumes, or other products to your skin after bathing.
- **Medications:**
 - **Blood Pressure Medications:**
 - Take your blood pressure medication as usual, including the day of surgery. On the day of surgery, take it with only a small sip of water.
 - **Diabetes Medications:**
 - DO NOT take any oral and/or injectable diabetic meds the night before or the morning of surgery.
 - Only take medications approved or prescribed by your surgeon with a small sip of water.

- **Fasting:** Adhere to the fasting instructions provided by your surgical team. Typically, this means no eating or drinking, including water, for 8 hours before your surgery. Check your paperwork or email our office for further guidance, if needed. This information will be on the 1st page of this document.
- **Jewelry and Valuables:** Remove all jewelry and refrain from bringing valuables to the clinic, including piercings.
 - If you have metal hair extensions (such as clip-in or microbead extensions), please inform your nurse before surgery.
- **Makeup and Skincare Products:** DO NOT wear any makeup or apply skincare products on the day of your surgery.
- **Menstruation and Surgery**
 - If you are on your menstrual period on the day of surgery, you may wear a sanitary pad or disposable underwear.
 - For safety reasons, internal menstrual products (such as tampons or menstrual cups) are not used.
 - After surgery, if you need menstrual supplies before leaving the facility, pads can be provided upon request. Application of any menstrual product is performed by the patient.
- **Clothing:** Opt for loose, comfortable clothing that doesn't need to be pulled over your head, particularly for a rhinoplasty. A button-up or zip-front top is ideal for after the surgery.
- **Communicating Questions or Concerns:** If you have any last-minute questions or concerns, please get in touch with us immediately. See the last page of this document for contact information.

Our team is committed to making sure you feel fully prepared and confident in the care you'll receive.

Post-Operative Instructions

The Night of Surgery

- Sleep on your back with your upper body elevated 45-60 degrees using 4-5 pillows, a wedge pillow, or in a recliner. Do not sleep on your side or lie flat, as this can increase swelling and scar tissue formation. Elevation will help with drainage and minimize swelling. Continue this for at least 1-2 weeks, or as long as your surgeon recommends.

Medications

1. Tylenol (Acetaminophen):
 - Pain Relief: Tylenol is safe to take for managing pain. Please avoid NSAIDs such as Ibuprofen and Aleve, as they can increase the risk of bleeding.
2. Narcotic Pain Medication:
 - Prescription Medication: If you received a prescription for narcotic pain relievers, take them as directed for pain management. Be aware that these medications can cause constipation.
 - Preventing Constipation: You will be prescribed a laxative and a stool softener to prevent constipation. It's important to start taking these with your first dose of narcotic pain medication. Additionally, increasing dietary fiber, fluid intake, and physical activity can help manage constipation.
3. Zofran (Ondansetron):
 - Nausea Prevention: Zofran is prescribed to help prevent nausea and vomiting, which can be common after surgery. Take this medication as directed, particularly before meals or as soon as you feel nauseated.
4. Antibiotics:
 - Infection Prevention: If you've been prescribed antibiotics, it's crucial to complete the full course as directed, even if you start feeling better. This helps prevent infection and ensures the effectiveness of the treatment.
5. Sinnech (Arnica Montana):
 - Reducing Swelling and Bruising: Sinnech is a homeopathic Arnica montana regimen that you'll take to help reduce swelling and bruising. This can potentially speed up your recovery process. Please follow the specific dosage instructions provided.

Nutrition

- **Diet:** Start with small light meals and progress as tolerated.
- **Hydration:** Stay hydrated with plenty of water. A general guideline is to aim for at least 8-10 glasses of water per day (about 2 to 2.5 liters). Limit or avoid caffeine and alcohol.

Activity

- **Sneezing:** When you sneeze, do so with your mouth open to reduce pressure on your nose.
- **Movement is Important:** Make sure you are up and walking around immediately after your surgery. This helps prevent Deep Vein Thrombosis (DVT), a condition where blood clots form in the veins, usually in the legs. Regular movement improves blood circulation and reduces the risk of clots. Start with gentle walks around your home and gradually increase activity as recommended by your surgeon.
- **Avoid any strenuous activity for the first week.**
- **Exercise:** Contact sports, yoga, and strenuous workouts should be avoided for 2 months. Light exercise is permissible.
- **Return to Work:** Most patients can return to work after the cast is removed at the one-week appointment.
 - This depends on your job responsibilities and the amount of face-to-face interaction and bruising. For further guidance, please consult with your surgeon.

Bathing & Swimming

- You may take lukewarm showers from the neck down. If you wish to clean your face, you may use a clean washcloth with water only, avoiding the nasal area. Avoid hot showers, as they can lead to nosebleeds or dizziness. Ensure your nasal cast remains dry until the night before your cast removal appointment.
- **The Ocean / Hot Tubs / Baths / Swimming Pools:** No tub baths or Jacuzzis for 1-2 weeks. Do not submerge your head in a public pool, lake or ocean for at least 6 months or until internal incisions have healed & sealed.

How to Care for Your Incisions

- **Drip Pad:** You will have some bloody drainage after surgery. Change your gauze drip pad as needed. It may be every 10-15 minutes at first but should slow down over the next 2 days. Use a fresh gauze with lots of Vaseline ointment on each new gauze.

- Do Not use Q-tips inside the nose the first 2 days.
- Ointment, ointment and more ointment on the drip pads!
- **Cleaning of the Nose:** Once active bleeding has stopped, clean around your nostrils 4-6 times a day with a Q-tip soaked in water. After each cleaning, apply a thick layer of ointment (such as Vaseline or Aquaphor) to keep the nostrils moist and prevent scabbing. Do not go deep into the nose, and do not let anyone else do this for you. Doing it yourself helps prevent unnecessary bleeding.
- **Cast:** Do not cut, pull, or trim any part of the tape off the cast. Leave it alone. If it starts to come off, email us a photo. We may remove and re-tape your nose. If the skin becomes red or bumpy or increases in itchiness, please let us know as this can be an allergic reaction to the tape.
- **Stitches:** Please avoid touching or disturbing your stitches. Dissolvable stitches will disappear on their own, while non-dissolvable ones will be removed by your surgeon at your follow-up appointment. Keep the area clean and dry, and follow your surgeon's care instructions. If any stitches cause discomfort, the surgeon can trim them during your post-op visit.
- **Packing:** You may have "absorbable gelfoam" which does not cause pain and does not need to be removed. Do not manipulate it. Cover the nostrils with a thick layer of ointment. If you have actual "Packing" apply a thick layer of ointment over the nostrils to keep packing moist. Do not attempt going inside the nose. Do not cut or trim the string.

Post-Surgery Cold Therapy (optional)

- **When to Start:** Begin icing your face 24-48 hours after surgery to help reduce swelling and discomfort.
- **How to Ice:** Use a plastic bag filled with crushed ice or ice packs.
- **Barrier:** Always place a wash-cloth between the ice and your skin to prevent frostbite or irritation. Never apply ice directly to your skin.
- **Timing:** Apply ice to the affected area for 15-20 minutes at a time, then remove the ice for at least 40 minutes to allow your skin to recover. Repeat this cycle as needed for the first 48-72 hours post-surgery.
- **When to Stop:** Discontinue icing once the majority of the swelling has subsided, usually around 3 days after surgery. Consult your surgeon if you are unsure whether to continue.
- **Important Notes:**

- Be gentle when applying ice to avoid disturbing any dressings, sutures, or delicate skin areas.
- Excessive or prolonged icing may cause skin damage, so stick to the timing guidelines above.

Week 1 Post-Op Appointment: The Night Before Your Splint Removal

- **Shower:** Get your face and nose cast soaking wet for 20 minutes under the shower with lukewarm water (NOT HOT WATER) the night before and the day of your cast removal (2 showers) so that we can remove your cast easily and painlessly. If you have dry skin, take a third shower. Let the water hit the top of your head and forehead and drip over your nose. Don't let shower spray directly hit your nose.

What to Expect

- **Asymmetries:** Nothing on the human face or body is perfectly symmetrical.
 - There will be swelling 100% of the time and minor asymmetries inside and outside the nose 100% of the time. This is normal.
 - New, slight irregularities may result where the bone and cartilage edges are healing. This is normal.
 - Most of these subtle irregularities or asymmetries are to be left alone. A very minor "touch-up" revision may be desired to smooth things out in about 5-10% of cases, after a year.
 - We will monitor your healing. But do not expect "perfect." Some irregularities or asymmetries cannot be improved even with repeat surgery. Do not lose sight of the big improvements.
- **Bruising:** It is normal to have bruising around the eyes. Most bruises disappear after about 3-4 weeks. The bruises will go from a purple/blue color to a yellow/green shade as it starts to resolve.
- **Breathing:** It's normal for internal nasal swelling to restrict airflow, and one side may feel more blocked than the other. Most patients experience improved airflow after a few weeks, but for some, it may take longer.
- **Drainage:** You will have bloody colored drainage after surgery. The Drip Pad will help catch this drainage. You may have thick mucus with bubbles forming. Your ears and sinuses may be clogged or "popping." Once you start cleaning & using the saline sprays, your nostrils should clear it up. Do not be aggressive, as that can start a nosebleed.

- **Skin Changes:**Your nose may feel dry, oily, or red, and you may experience pimples. These are normal and temporary skin changes during the healing process.
- **Tip Numbness:** It is normal for the tip of the nose to be numb. This is temporary and will improve with time.

Emotional Recovery

It's normal to experience a range of emotions after surgery, especially when the appearance of your body changes. Some patients feel relief, while others may go through moments of doubt or grief. Please know that these feelings are valid and part of the healing process. You're not alone, and support is available if you need it.

Signs of Infection or Complications

It's important to monitor your recovery and be aware of any signs that may indicate an infection or complication. Contact your surgeon immediately if you experience any of the following:

- Increased redness, warmth, or swelling around the incision site
- Pus-like or foul-smelling drainage from the wound
- Fever over 101°F (38.3°C)
- Severe pain that is not relieved by prescribed medication
- Excessive bleeding or new bruising
- Persistent chills or feeling unwell

Prompt communication with your healthcare team ensures the best possible recovery. Do not hesitate to reach out if you have concerns.

Follow-up Care

- **Prioritizing Appointments:** Attending follow-up appointments is crucial for monitoring your recovery & ensuring the effectiveness of your treatment.

Patient Communication Guide: Who to Contact Post-Operation

Type of Concern	Contact Information	Instructions/Examples
Non-Urgent Questions or Concerns for Dr. Ching or Dr. Long	Email: clinicalrn@drshimching.com	<ul style="list-style-type: none"> • General recovery questions • Appointment inquiries • Prescription refills
Urgent Questions or Concerns	Office Phone: (808) 585-8855 <u>After 5pm or on weekends:</u> Dr. Ching & Dr. Long @ Physician's Exchange (808) 524-2575	<ul style="list-style-type: none"> • Swelling, bruising, or redness • Severe pain • High fever • Unusual discharge or odor • Uncontrolled bleeding
Medical Emergencies	Call 911 or go to the nearest emergency room	<ul style="list-style-type: none"> • Difficulty breathing • Chest pain • Severe calf pain • Signs of heart attack or pulmonary embolism

Our Commitment to You:

We are here to support you throughout your recovery journey. Your safety is our priority, and we encourage open communication. By guiding you on the most appropriate communication channels for your concerns, we aim to provide efficient and effective care, ensuring you feel fully supported & cared for.