

AMIR M. KARAM, MD

PRE AND POST OPERATIVE GUIDE YOUR FACIAL REJUVENATION PROCEDURES



TABLE OF CONTENTS

Contact Information	1
Introduction	2
Letter from Dr. Karam	3
Meet the Surgical Team	4
Surgical Timeline	5
Preparing for Surgery	6
Surgical Prep Spreadsheet	8
Preparing for Your Procedure	9
What to Expect	10
Vertical Restore and Vertical Prevent	
Vertical Restore and Vertical Prevent FAQ	
Modified Lip Lift	14
Upper and Lower Blepharoplasty/Lower Lid Skin Pinch	15
Upper and Lower Blepharoplasty/Lower Lid Skin Pinch FAQ	16
Fat Transfer	17
Fat Transfer FAQ	
Skin Resurfacing: Contour TRL Laser/Chemical Peel	
Discharge & Post-operative Instructions	23
Phases of Healing: One Week and Beyond	25
Phase 2 Maintaining Your Surgical Results: The CVip Membership Program	27
Carmel Valley Facial Plastic Surgery Revision Policy	
Medications to Avoid Before and After Surgery	

CONTACT INFORMATION AND RESOURCES

Reassurance during the surgical process is important and we want you to feel comfortable voicing any questions or concerns that may arise pre and post-operatively. In rare cases, there may also be situations that require intervention.

Below is a complete list of contact information for our office (M-F, 9:00-5:00), as well as Dr. Karam's personal contact information (after 5:00 pm weekdays and on weekends).

Office Phone: 858.259.3223
Office Fax: 858.259.3221
Email: Postop@drkaram.com

Dr. Karam Cell: 858.353.9885 Dr. Karam Home: 858.356.9291 Dr. Neda Vossoughi: 949.370.6332

We encourage you to visit our website (www.drkaram.com) and the links below for a closer look at what to expect before, during and after your surgical journey.

http://www.drkaram.com/consultation-and-testimonials/ http://www.drkaram.com/pre-op-post-op-care-and-recovery-stages/



INTRODUCTION

Helping you **look as young as you feel** is what this is all about. You are about to embark on an exciting a very rewarding journey and we are excited and honored to be a part of it. In the end we will celebrate a restored, youthful, and refreshed version of you, while maintaining natural looking results. I am personally humbled and honored that you have chosen me to perform your procedure. I also understand how important and meaningful having facial surgery is, and I take this task very seriously. You want to look as healthy and vibrant as you feel inside, and I am committed to providing you with the best results possible. Please rest assured that my staff and I will be there with you throughout your journey starting before and continuing well after your surgery.

Warmly,

Dr. amir M. Karam

LETTER FROM DR. KARAM

The entire Carmel Valley Facial Plastic Surgery team and I would like to start by congratulating you on your decision to have an aesthetic and/or facial rejuvenation procedure with us. We are honored by your choice and are committed to helping you make this as simple and streamline as possible.

Proper preparation is essential for optimal recovery. Knowing how to prepare and what to expect will put your mind at ease as you go through the different phases of recovery. We know that individuals heal differently and have slightly different experiences after these procedures.

After doing thousands of these procedures over the years, it is reassuring to know that despite differences between people and procedure combinations, the overwhelming majority of our patients heal very well with time. This outcome of optimal healing is based on the fact that every procedure we perform is as minimally invasive as possible and performed with repetition, consistency, and predictability. Think about your healing in two different phases- early recovery and late recovery. Early recovery encompasses the first two weeks following any procedure. Typically patients look the most swollen and unusual during the first 3-4 days. Swelling starts to settle after the 5th day and continues to decrease rapidly until around the 2 week mark. At this point, most patients are looking good enough to get back to work or social activities. Keep in mind, by no means is your recovery finished at this time. You should, however, be ready to get back to your day-to-day life in this phase of recovery.

Healing continues as the weeks and months go on. During late recovery, which spans up to one year after surgery, everything continues to settle and improve. (For example, a little bump or a scar that is not quite healed and may seem noticeable at 2 months, will most likely not be a problem by 12 months). Following a procedure, many things will get better on their own and with time. We schedule regular follow-up visits with you so that all your questions and concerns are addressed.

It is important to note that unlike most Plastic Surgery practices in this country, we focus exclusively on Facial Rejuvenation, which to us means we are passionate about keeping you **looking as young as you feel**. To that end, we have developed a comprehensive program consisting of two phases of treatment.

Phase 1: This refers to your upcoming procedure. This is your one big stroke to take a lot of years off and love your face again.

Phase 2: This refers to maintaining your results. We know aging is a continuous process and your investment in Phase 1 is significant. We have learned over the years that actively maintaining your skin will slow the aging process significantly as well as help you skin look younger with each passing year. Your relationship with us doesn't end after surgery.

This booklet along with the videos have been developed to help you get through this awesome stage in the safest and easiest way possible.

Again, congratulations on your exciting decision. We are honored to be able to go through this lifeenhancing journey with you.

Sincerely,

MEET THE SURGICAL TEAM

Dr. Karam has put together is fantastic group of well-trained, caring and experienced providers to make your surgical journey as smooth and positive as possible.

Patient Care Coordinators

Lead Patient Care Coordinator Charity Ponce Patient Care Coordinator Kaley Tiller

Before surgery you will be very involved with our Patient Care Coordinators.

Perioperative Care Specialist

Hilary Heiman

At your Pre-op appointment, you will meet our Perioperative Care Specialists, who will prepare you for your upcoming procedure.

Surgical Operating Room Team

Stacie Kennerly, R.N. Carolann Berman, R.N. Ingrid Jansson, R.N. Katherine Kou, C.S.T

The day of your surgery, you will be greeted by one of our experienced and caring Surgical Nurses. They will help get you ready for your procedure and be with you throughout your procedure. They will help coordinate your discharge home and will speak to your family.

Post Operative Care Specialists

Jordan Burke, MSN, FNP-C Alejandra Franco, M.A. Taylor Tompkins, M.A. Abbi Cartagena, C.M.A

After your surgery you will be greeted by one of our experienced post operative specialists where they will go over all post operative care needs. Any questions you have, please feel free to ask. They will also make your appointments anywhere from your 2 to 7 day appointment follow up.

SURGICAL TIMELINE



PREPARING FOR SURGERY

WHAT YOU NEED TO PURCHASE

General

□ Aquaphor □ Spanx/Tights/Leggings (for fat transfer) □ Hydrogen Peroxide □ 6-8 Frozen Pea Bags □ Q-Tips □ Dial Antibacterial Soap □ Gauze □ Paper Towels □ Dark two-piece sporting attire □ Soft diet foods e.g. yogurt, smoothies, bananas, oatmeal □ Disposable underpads □ Baby shampoo □ Small bottle dawn soap

If having Laser or Chemical Peel

□ Spray bottle □ Cleanser □ Aquaphor Ointment or Crisco □ Q-tips □ Distilled water □ White vinegar □ Cetaphil lotion □ Cetaphil cleanser

What we provide

□ Z4X4 gauze □ Vitamins □ Artificial Tears □ Saline Nasal Spray □ Eye Ointment □ Silicone Scar Gel □ Sunscreen

TWO WEEKS BEFORE SURGERY

Discontinue Aspirin/Ibuprofen: Stop taking NSAIDS/medications containing aspirin or ibuprofen two weeks prior to your procedure. These medications can cause bleeding complications during and/ or after surgery. Please review the list of drugs containing aspirin or ibuprofen carefully. If necessary, acetaminophen (Tylenol) can be taken in place of aspirin/ibuprofen.

Do not smoke or use nicotine: This causes constriction of the blood vessels and irreversibly effect the healing process. If you are a smoker/nicotine, it is advised that you discontinue smoking/nicotine six weeks prior to and for at least six weeks after your procedure.

Do not drink alcohol: Please refrain from drinking alcoholic beverages two weeks before and two weeks after surgery. Alcohol in the blood stream may increase chances of healing and/or bleeding complications.

Vitamins: Stop all daily vitamins and herbal supplements that are not specifically approved by Dr. Karam. Certain over-the-counter daily vitamins and supplements may increase your risk of post-surgical bleeding. Start our recommended VitaMedica Recovery Support Program two weeks before your surgery and begin taking Arnica and Bromelain at least three days prior to your procedure.

Post-surgical products: Post-surgical products including scar gel and/or sunscreen will be provided to you.

THE DAY BEFORE SURGERY

Start antibiotic/antiviral: Take as directed, starting the morning before your surgical procedure. Only take antiviral If applicable.

Take daily blood pressure meds (if applicable): If you take prescription blood pressure medication on a daily basis, continue to take your BP meds as you normally would on the day of surgery. If blood pressure medication is prescribed to you please start these 1 week before your procedure and continue for 2 weeks after.

Cleansing: Wash your face, neck, and hair with antibacterial soap the night before your surgery. Please take out your eyelash extensions. If you are having a fat transfer, please also wash the fat harvesting sites which include your outer/inner thighs and abdomen. Repeat this the morning of your surgery.

Do not eat or drink 6 hours prior to procedure: For IV Sedation cases, it is okay to take Ativan with a small sip of water one hour prior to surgical arrival time. For General Anesthesia, please refrain from drinking or eating for 8 hours. (Local anesthesia cases without IVs sedation may drink or consume a light meal the morning of their surgery).

Confirm surgical arrival time: We will call you the day before your surgery to confirm your arrival and start time. It is important that you arrive on time on the day of your procedure. (Please be aware that while we try our best to adhere to these specific times, sometimes events beyond our control will affect the surgical schedule).

THE DAY OF SURGERY

Cleansing: Wash your face with antibacterial wash the morning of surgery. It is important that you arrive without make up and eyelash extensions, moisturizer, creams or lotion on your face.

Clothing: Wear only comfortable, loose fitting clothing. Button-up/zipper shirts and jackets that don't require overhead placement are recommended. Lockers will be provided where you can place your clothing during surgery. A gown and socks will be provided by the surgery center.

Jewelry/contact lenses: Please leave all valuables at home. Do not wear any jewelry to your procedure. Cell phones, purses, or any items that you must bring with you can be locked up in our patient lockers during surgery. Do not wear contact lenses.

I.v. sedation patients: Take one Ativan and one Zofran tablet one hour prior to your surgical arrival time. These medications will be prescribed to you at your pre-op visit. We will give you an additional Ativan when you arrive at the surgical center, prior to the start of your procedure. Please do not take any antibiotics or vitamins the morning of surgery.

Arrival: Please arrive on time on the day of your surgery. For all surgical procedures and post-operative appointments, you are to use the Carmel Valley Surgical Center entrance (Suite 100A) and ring the doorbell at the inside door. A member of the surgical staff will greet you and assist you in preparing for your procedure.

Make arrangements for a responsible adult to drop you off and pick you up: It is required that you have a responsible adult caretaker for the day of your surgical procedure and 24 hours after. We can't release you to a Lyft or Uber driver. If you have trouble arranging transportation and care, please communicate this with us and we can recommend a nursing agency to you. We will not be able to perform surgery without this criteria being met.

SURGICAL PREP SHEET: TWO WEEKS PRIOR TO SURGERY AND BEYOND

Days from Surgery	-14	-10	φ	-2	5	0	+1	+2	+3	+4	+7	+10	+14	28
Do's														
3 tablets CSMF - AM														
3 tablets CSMF - PM														
Vitamin K-10 × 100 microgram														
2 caps. Bromelain 3x/day														
3 tabs. Arnica 3xday														
1 antiviral (if applicable) 2x/day														
1 antibiotic 3x/day														
Antibacterial Soap Wash														
1 Ativan/ 1 Zofran 1 hour prior to surg.														
Surgery*** (Confirm Arrival Time)														
Leave bandage "on" for 24 hrs.														
Apply Aquaphor 3x/day														
Apply eye drops 3x/day														
Apply eye ointment before sleep														
Remove Aquafor/Clean/Reapply 2x/day														
Don'ts														
No pain reliever except Tylenol														
No alcohol - no smoking														
No make-up, no moisturizer														
No overhead garment														
No contact lenses														
No shower, no hair washing														
No strenuous activity														
No hair dying														
No tennis, golf, swimming, jogging, etc. (Leisurely walks O.K.)														

PREPARING FOR YOUR PROCEDURE: VITAMINS & HERBAL SUPPLEMENTS

We have found through years of experience that our patients who take medical grade vitamins and herbal supplements have a much faster recovery and tend to experience less overall bruising and swelling. The VitaMedica Vitamins contain all the essential nutrients for healing and include the recommended herbal supplement Arnica and Bromelain, which help to reduce bruising and swelling following your procedure. Vitamin K is also essential for healing as it naturally helps clot the blood and reduces the chances of bleeding and excessive bruising. These supplements are available in our office and are strongly recommended to be taken as directed. You will begin taking the VitaMedica Clinical Support Program 2 weeks prior to your procedure and continue for 2 weeks after surgery.

In the Morning: Take 3 tablets of Clinical Support Morning Formula with a complete breakfast In the Evening: Take 3 tablets of Clinical Support Evening Formula with dinner, or within 4 hours after dinner.

*About 10% of people experience what is called "Niacin flush" with high-potency vitamins. This involves a temporary reddening of the skin that lasts 10-15 minutes. It is a normal response and is harmless. Usually it will disappear after one or two days of taking the vitamins. To decrease the chance of the niacin-flush occurring, we recommend building up slowly to the full dose of Clinical Support Program. When starting the supplement, simply reduce the dose to one tablet for 1-2 days, then two tablets for 1-2 days, and so forth. This approach will also help to prevent any nausea that some people experience after taking certain supplements.

Vitamin K: Take 1mg Vitamin K daily starting 10 days prior to your surgery. The tablets come in 100 micrograms which means you will take 10 tablets a day. (1mg = 1000 micrograms). Vitamin K helps to minimize bleeding and bruising. This vitamin should be avoided if you are currently taking any blood thinning medications, such as, Heparin and Coumadin/Warfarin, or if you have any history of blood clots. Note: You will discontinue taking Vitamin K after your surgery.

VitaMedica Bromelain: Begin taking the Bromelain three days prior to your surgery. Take two capsules three times a day. For best results, it should be taken between meals preferably on an empty stomach. For example, upon waking, late morning, or late afternoon. VitaMedica Bromelain is selected for its proinflammatory metabolites and inhibits the manufacture and release of histamine and other inflammatory mediators.

Note: You will continue taking the Bromelain after surgery and until the bottle is finished.

VitaMedica Arnica: Begin taking the Arnica 3 days prior to your surgery. Take 3 tablets 3 times a day until the bottle is empty. Do not brush, eat, or drink anything for 15 minutes prior taking Arnica or 15 minutes afterwards. Drop tablets into bottle cap and place tablets under the tongue and let them dissolve naturally.

Note: You will continue taking the Arnica until all bruising is gone or the bottle is finished.

WHAT TO EXPECT: SURGICAL CONSIDERATIONS

It is necessary that you are comfortable with and understand any risks involved in surgery so that you can give informed consent and make educated decisions regarding your procedure. Serious complications are very rare; however, it is important that each patient understands the signs and symptoms of possible complications and how to detect them as early as possible.

NORMAL SURGICAL EXPERIENCES

Swelling/Bruising: Moderate swelling and bruising is normal after any surgery. It is also important to understand that swelling and/or bruising may be ASSYMETRICAL in the initial healing period post operatively. Asymmetry is quite normal and is not indicative of your final surgical results. Icing as directed, and compliance with the recommended supplements (i.e. Arnica and Bromelain) will decrease the severity of these symptoms.

Pain (Mild to Moderate): Mild to moderate discomfort is normal and expected following any surgery. In most cases, pain will resolve within 1-3 days. However, if your pain becomes severe and is not eliminated by Tylenol or prescribed pain medication, please contact the office.

Numbness: Temporary numbness, specifically along incision lines and areas of surgical manipulation, is normal. Sensory nerves to the skin surface may need time to heal. Sensation will typically return within a few months following surgery.

Bleeding: A small amount of bleeding/drainage from incisions or surgical sights immediately following a procedure is normal. If there is bleeding in excess, or if your drainage is saturating your dressing accompanied by significant swelling or pain, this may be indicative of a hematoma. If this occurs, please contact the office immediately or Dr. Karam after hours.

Nausea/Vomiting: Nausea is not uncommon, especially following a general anesthesia procedure. To help prevent this unpleasant side effect of surgery, Zofran will be prescribed to you during your pre-op visit for any post-procedural nausea. For IV sedation cases, we recommend taking Zofran when you take your Ativan pre-operatively (one hour before your surgical arrival).

Red/Itchy Incisions: Discolored incision lines are a part of healing and can present in various colors ranging from red to pink and finally white. All new scars will go through this process. A scar gel recommended for purchase at your one week post-operative visit will help to accelerate the healing phases of your incisional scars. Keeping your incisions lubricated with the recommended products during your first week of healing will help with both scarring and itching. Sometimes as incisions heal around your sutures, the itching will increase. Placing cold, damp gauze on the incision can help to soothe the itchy area. It is important to know that it is normal and will pass with time.

UNCOMMON COMPLICATIONS

Serious complications are very rare; however it is important that each patient understands the signs and symptoms of possible complications and how to detect them early on.

*IF YOU EXPERIENCE ANY OF THE SYMPTOMS LISTED IN THIS SECTION, IT IS IMPERATIVE THAT YOU CONTACT CVFPS DURING OFFICE HOURS OR DR. KARAM IMMEDIATELY SO THAT WE CAN SEE YOU AS SOON AS POSSIBLE FOR INTERVENTION.

Hematoma: A very rare but possible complication involved with all major incisional surgeries includes a hematoma, or an accumulation of blood under the surface of the skin. In the case of a hematoma, the accumulation of blood is usually accompanied by severe pain/discomfort and swelling, generally on one side of the face. Small collections of blood will usually absorb on its own, but for more severe cases, this will require drainage or even possible surgical intervention

Infection: Signs of infection may include chills, fever, excessive swelling or redness with a sudden onset, purulent drainage and/or excessive pain/discomfort.

Lower Blepharoplasty: Severe swelling, pain, or loss of vision could indicate a hematoma and is a true emergency. If these symptoms are noticed, contact the office during business hours or Dr. Karam immediately after hours or weekends. If by chance you are unable to get a hold of Dr. Karam or CVFPS staff, go to an emergency room immediately for prompt medical attention.

VERTICAL RESTORE AND VERTICAL PREVENT: RESTORING THE YOUTHFUL FACIAL SHAPE

The smooth, youthful, firm contour of the jawline, neck and outer eyelid region will likely be replaced with the formation of jowls, neck laxity,outer upper eyelid laxity and an overall depletion of facial volume over time. Vertical Restore/Prevent is designed to reposition the facial soft tissues back into their youthful position. These procedure are designed to address the outer brow region, the mid-face, the jawline, and neck. Vertical Prevent addresses 3 out of 4 of these regions. Vertical Restore address all four regions.

Post-Operative Appointment: Our post operative care specialist will see you the NEXT DAY after your surgery to check your surgical incisions and to ensure that everything is starting to heal properly. During this visit, we will remove your surgical dressings and thoroughly clean the incisions.

Icing: You may ice for 20 minutes on and 20 minutes off. Please use a barrier between your skin and the ice pack/frozen peas to avoid any damage to your incisions, skin, and to prevent thermal contact burns.

Post-Operative Dressing: The original dressing placed around your incisions will be removed the day after surgery. After this you will only use ointment to cover your incisions.

Compression Sutures: Dr. Karam will most likely use compression sutures around the temples, and neck. This reduces swelling and the chances of developing a hematoma. You will be scheduled accordingly between Day 1 to Day 4 to have them removed per Dr. Karam.

Drain Care: JP drains / Active bulb drains are used in patients that are having Vertical Restore/Prevent. These drains will remain in for 5 days after surgery. These drains are a closed-suction medical device that will continuously pull fluid from the face and neck, helping speed up the healing process.

- As the drains fill up with fluid, the bulb will expand. Once the bulb is about half way full you will pull the drain stopper and empty the fluid into the toilet. After discarding the fluid, squeeze the bulb tight and reinsert the stopper so it creates a vacuum.
- The drains will be sutured in along the hairline behind each ear. To help prevent discomfort keep the drains safety-pinned high on the shirt or connected to the lanyard. This will help to create slack on the tube and keep tension off the sutures holding it in place.
- You may shower 48 hours after your procedure except for patients having a laser you must wait 72 hours. Wait 48 hours after drain removal to shower.

Post Procedure Activity: Post-surgical complications are uncommon following your Vertical Restore procedure. It is not unusual for mild drainage and incisional bleeding to occur in the first 48 hours following surgery. Please take it very easy for the first 2 weeks following your procedure. Avoid bending over, looking down, exercise or heavy lifting to avoid excess swelling or pressure to your face. By 4 weeks, you can return to full exercise. **If there is a sudden isolated swelling on one side of the face or neck, associated with intense pain, this could be signs of a hematoma. The affected side of the face becomes very firm and swollen in most of these cases. If you suspect bleeding or an infection, please call the office immediately or if after hours, please call Dr. Karam's cell or home.

INCISION CARE

• It is very important that you keep your incisions clean and remember to always wash your hands before caring for your incisions.

- The dressing around your face face is removed at your 1-day post-operative appointment. You may shower after 48 hours unless you are having a laser procedure. Please feel free to wash your hair, keeping any shampoo/conditioner away from incision lines. (If you did a chemical peel or Contour TRL laser treatment with your surgery, please wait a full 72 hours to shower). At the 24 hour mark you will also begin cleaning your incisions twice a day (morning and night) with hydrogen peroxide on a Q-tip. This process will be continued for a full week/until all sutures are removed.
- At the 48 hour mark you will also begin cleaning your incisions twice a day (morning and night) with hydrogen peroxide on a Q-tip. This process will be continued for a full week/until all sutures are removed.
- Following the cleaning of your incisions with Hydrogen peroxide, use Aquaphor ointment along all facial incisions to keep them moist and to provide a good healing environment.
- After you have finished cleaning and applying ointment to your incisions, re-wrap the ace bandage around your face with light pressure.

VERTICAL RESTORE/PREVENT FAQ:

1. How long until the incisions heal?

Everyone heals at a different rate. As a rule of thumb, incisions look the worst between weeks 2-6. They will continue to improve up to one year following the procedure. It is important to be patient during this healing process. Our incisions heal extremely well in the overwhelming majority of cases.

2. Why is there rippling and bumpiness where the sutures are or used to be?

Swelling along the incision lines commonly causes rippling/bumps to occur. The skin will relax and the rippling will begin to smooth out once the sutures are removed at your one-week post op appointment. The bumps can take a few weeks to a few months to completely smooth out.

3. What is "poking" out along the incision line? I think I have sutures left in.

Some patients will experience a stitch that feels like a wire poking out from the facelift/browlift incision line. This stitch is one of the sutures beneath the skin and the tail end of the suture can "work its way out" through the skin. The stitch is harmless and any of the staff members can easily clip the suture so you do not feel it sticking out anymore. There is no increased risk of infection or negative results occurring from this minor nuisance. The sutures will dissolve in 4-6 months.

4. When will the numbness and tingling go away?

Numbness is common and may last a few months.

5. It has been a couple weeks and my face and jaw still feels very tight, when will this go away?

This procedure is effective and lasting because your facial muscles are literally lifted and tightened in a more youthful position. You will typically experience this for 3-4 weeks.

6. Are there sutures under the skin in the muscle?

There are sutures under the skin. These sutures are the ones that physically lift and hold your facial muscles into their new "younger-looking" position.

7. Will the procedure change the shape of my eyes?

The procedure will not change the shape of your eyes. The purpose of the procedure is to simply lift the tail end

of the eyebrows so they are no longer sagging and to make the transition from the facelift to the brow area more seamless to achieve a refreshed look.

8. How long will the results last?

This is always difficult question to answer because it is hard to define "lasting." This is permanent. However, aging does continue even after the procedure. The rate of your aging will be significantly slower once you have this done. The average patient will feel satisfied for 10-15 years.

9. When can I wear makeup?

Patients are free to wear makeup 9-10 days after surgery. However, it is recommended that all incision lines only be covered with breathable makeup to allow for those areas to heal properly. We recommend Elizabeth Arden mineral powder or Oxygenetix liquid foundation, both of which can be purchased in our office. Please be mindful to discontinue any products if your skin becomes red, itchy, and/or inflamed.

10. When should I start using sunblock?

Sunblock is an important beauty element that should part of your daily routine. Sunblock should be used beginning 9-10 days after surgery including over the incision lines. Although sunblock should be part of your life long skincare routine, it is particularly important the first year post surgery because you run the risk of your incision lines discoloring. We recommend Elta MD sunblock which provides the necessary level of protection and can be purchased in our office. Please be mindful to discontinue any products if your skin because red, itchy, and/or inflamed.

11. Can I use scar gel to speed up the healing process of my incisions?

For patients who want to be as proactive as possible, scar gel is a good option. We do recommend a medical grade scar gel such as Silagen, which creates a silicone barrier over the incision line.

12. After surgery, the two sides of my face look different. Why is that?

In addition to natural asymmetry, during the first 3-4 months after your procedure, the swelling doesn't resolve exactly the same way. This unevenness will improve back to baseline.

13. Why are there scabs or a small area that doesn't look like its healing along my hairline?

This is relatively common. This is sometimes related to a hair that is growing into the incision line or a stitch that is sticking out. If you are in San Diego, make an appoint to see one of our Post-operative Care Specialists and they will take care of it. If out of town, please call our office and we will help advise you on the next steps. You may need to see someone to help with this. However, it is nothing to be concerned about.

MODIFIED LIP LIFT

Aging of the facial soft tissues causes them to get longer. The upper lip is effected by these same factors and with age starts to appear heavy. The upper lip starts to appear thin and almost disappears. The Modified Lip Lift is a procedure designed to restore the lip back to its original length by making an incision along the base of the nose and removing a portion of skin. This special incision design helps to hide the incision making this procedure a very useful and important part of the facial rejuvenation plan.

POST PROCEDURE INCISION CARE

Apply the same incision care as discussed in the Vertical Restore section. There are no special instructions. Sutures will be removed between 4-5 days post procedure.

UPPER AND LOWER BLEPHAROPLASTY/LOWER LID SKIN PINCH

Aging of the eyelids involves both soft tissue excess and volume loss. Rejuvenating the eyes for a more youthful, restful appearance involves removing this excess tissue and/or replacing this periorbital volume that has depleted with age. An Upper Blepharoplasty is defined as a procedure that removes excess upper eyelid skin. The incisions are placed in the natural upper eyelid crease. A Lower Eyelid Skin Pinch is a procedure that removes excess lower eyelid skin. The incisions are placed in the natural lower eyelid crease. A Lower Eyelid Blepharoplasty is a procedure designed to remove lower eyelid excess fat (bags) that causes bulges underneath the eyes. Dr. Karam performs a transconjunctival lower eyelid blepharoplasty in which the incision is placed inside the eyelid and in most cases, a skin pinch is combined to improve results.

WHAT TO EXPECT

Vision: Your vision may be blurry for a day or two following surgery due to the medicated ointment we use to protect your eye during and following surgery.

Burning Sensation: It is common to have a burning sensation. To help reduce swelling and burning, please follow the directions below:

- 1. When you get home, pour chilled bottled water in a bowl & dip 4x4 inch gauze in the water.
- 2. Place the gauze over the lids (keeping eyes closed). Do this for 20 minutes (alternating 20 minutes on and 20 minutes off as frequently as desired for comfort).
- 3. It is important that you place ice packs over the eyes after surgery at least a few times a day. You may use frozen peas in a clean baggie or a baggie filled with crushed ice. Place them over your closed eyes but always use a paper towel, gauze sponge or washcloth barrier on your skin for protection under the baggie.

Dry eye: It is common to have dry eyes especially during the first week after surgery. To help avoid dry eye following surgery put two drops of the artificial tears provided for you in both eyes (3-4 times/day) for one to two weeks after surgery. Use eyeointment directly into the eye at night to lubricate the eyes while you sleep if desired.

Bruising and Swelling: It is normal and expected that both bruising and swelling will peak between days 2-4 post surgery.

INCISION CARE

Twenty-four (24) hours after your surgery start cleaning the incisions twice a day (morning and night). Using a Q-tip and hydrogen peroxide gently clean your incisions. Be careful not to get the hydrogen peroxide in the eye.

Following the cleaning with Hydrogen peroxide, Use the eye ointment to keep incisions moist. Keep a thin layer of ointment over the incisions the entire first week after surgery at all times. This ointment will provide for a good healing environment and will help the "itchy" sensation subside.

BLEPHAROPLASTY/LOWER LID SKIN PINCH FAQ

1. Why is there "rippling or bumps" where the sutures are or used to be?

Swelling along the suture line commonly causes rippling and/or bumps to occur. The skin will relax and the rippling will begin to smooth out once the sutures are removed at your one-week post op appointment. The bumps will take a few weeks to a few months to completely smooth out.

2. When will the incisions heal?

The eyelid is some of the fastest healing skin on the body. As a rule of thumb, incisions look the worst between weeks 2-6. They will continue to improve for up to one year following the procedure. It is important to be patient during this process. These incisions heal extremely well in the majority of cases.

3. When can I wear eye makeup?

Patients are free to wear makeup 10 days after surgery. However, it is recommended that all incision lines be only covered with breathable makeup to allow for those areas to heal properly. We recommend Elizabeth Arden mineral powder or Oxygenetix liquid foundation, both of which can be purchased in our office. Please be mindful to discontinue any products if your skin becomes red, itchy, and/or inflamed.

4. Why is my vision a little blurry?

During your procedure, a lubricating ointment or eye drops are placed in the eye for protection. As a result, your vision may remain blurry following your surgery for a day or two.

5. How does he know where to make the incision? And why is one side healing faster than the other?

The incisions are made in the natural upper and lower eyelid crease (superior and inferior tarsal crease, respectfully). Be mindful that the natural crease in one eye may be higher/lower than the other eye. Incisions are closed exactly the same in every case and there is never a difference in technique between the 2 sides of the face, however, the two sides do heal differently. They eventually even out and look the same.

6. Why are the skin pinch incisions so low?

It is made in the inferior tarsal crease. This location is the safest position to place the incision. When placed higher the muscle that functions to hold the lid up will be weakened and risk pulling the eyelid down.

FAT TRANSFER

Starting around age 35, facial fat begins to diminish in a predictable and progressive way. This depletion can make the face appear deflated, tired, and older. A facial fat transfer allows for the natural replacement of this lost volume using the patient's own fat cells.

WHAT TO EXPECT

Fat is living tissue. Therefore, as soon as it is transferred, the fat needs to be provided with a blood supply and nourishment in order for it to survive. By two weeks, your body will have reabsorbed the fat that did not survive the transfer and the remainder of the fat will begin to regenerate. During this period, the fat is living but the cells themselves haven't yet started storing their own fat (which is what actually makes them "plump" up). Initially, the fat will deflate (1-3 months following the procedure). We refer to this as the low point. Starting around 6-9 months following the procedure, the fat cells begin to re-inflate. For this reason, patients usually look their best 1-2 years following a fat transfer. This is also why we do not do touch up fat transfers until at least 1 year has passed. By waiting at least one year post-procedure, we avoid unintentional over-filling the face.

POST OP INSTRUCTIONS

Icing: You are able to ice the treated areas for 48 hours (2 days) after the surgery. Please discontinue icing after this time frame to prevent fat loss to the fat transfer areas.

Swelling and Bruising: You will have significant swelling and possible bruising. This generally will peak days 2-4 and will improve after 1-2 weeks. Be prepared to not look like yourself during the first week. It is common for one side of the face to have more swelling than the other as well as hardness and/or bumps is often related to swelling. Avoid bending over, looking down, or heavy lifting this helps to avoid excess swelling into your face.

Fat transfer Process: Remember that the fat transfer is a gradual transformation; it is normal to have increased swelling, hardness and unevenness throughout the healing process (typically these side effects can last anywhere from 7 to 14 days). You will be at your lowest point of fat at 2 months, but this will gradually increase up to the 1 year mark where your fat will peak.

Showering/Bathing: You may shower or bathe 2 days after surgery (Do not shower until 72 hours after surgery if you have had a chemical peel or Contour TRL laser with your procedure, however.)

Harvest Site: The area we harvest the fat from (abdomen or thighs) may be tender and have some potential to bruise. This is normal and will subside within 1 to 2 weeks post-surgery. There will be dissolvable sutures that take approximately 1-2 weeks to dissolve.

*If you have any increase in redness, pain, drainage or fever that develops post-procedure, please let the office or Dr. Karam know immediately.

18

FAT TRANSFER FAQ

1. How long will I be swollen?

Majority of swelling will settle between the first and second week. Swelling will continue to improve up to two months after the procedure; however, you will not look distorted or unusual during this time.

2. How does Dr. Karam know how much to inject and how much will I maintain?

Based on his experience of performing over 5000 fat transfer cases, Dr. Karam knows how much fat to add in order to correct a certain deficiency. Each case is unique and the amount of fat chosen is based on the individual patient and the desired goal. Dr. Karam always errs on the side of under-filling as opposed to over-filling. This ensures a natural outcome. In general, most patients retain about 50% of the fat that is injected. In some rare instances, some patients may keep slightly less.

3. Is it normal for one side to be more swollen than the other?

Swelling is very common after surgery and it is normal and expected for one side to be more swollen than the other side. In addition, do not be surprised if the next day it's the opposite side that is more swollen even if you are following all the instructions correctly. In some cases, patients experience more swelling on one side because they are sleeping on that side. We ask that you sleep inclined and on your back for at least the first week to avoid this asymmetrical swelling.

4. What are the lumps and hardness that appear under the skin?

The lumps and hardness are a result of swelling and will diminish with time.

5. Why does it look like the fat is diminishing between 1-3 months after the transfer?

Fat is living tissue. We are essentially transplanting a fat graft (a small amount of fat tissue). Since it is a living and functional tissue, it needs to establish a blood supply in its new home. During this period, the fat is living but the fat cells haven't started storing fat (which is what fat cells do to make them plump). So during this period, the fat grafts deflate (1-3 months following the procedure). Then starting 6-9 months following the procedure, they begin acting as they normally do and they start to re-inflate and get more full. This is why patients look best 1-2 years following a fat transfer. This process is the same for hair transplants and even trees/plants that are transplanted.

6. Will there be stitches where he injects the fat?

There are no sutures used on the face after a fat transfer procedure. You will have small "poke hole size" scabs that form where the fat is injected, but those usually go away within a few days. However, absorbable sutures are placed where we harvest the fat. These stitches will dissolve on their own within 1-2 weeks. It is recommended that sunscreen be used for the first year to prevent scarring.

7. Where is the fat harvested?

Dr. Karam has found that the best sites for harvesting fat are the inner/outer thighs or the stomach.

8. Does he freeze the fat if I need a touch up in the future?

Dr. Karam only harvests the amount of fat that is needed for the procedure. He does not take out any extra fat for any reason, including for future use. Frozen fat is unreliable at best since the freezing and thawing process is too harsh for the delicate fat cells to survive.

9. Will massaging help with the swelling?

No, massaging is not needed and can actually be harmful in terms of your results. There may be specific times and situations that Dr. Karam will recommend massaging; however, this is rare and if he does not suggest it, then that indicates that you do not need to do it.

10. Are there other sources that can cause swelling?

Increased activity level can increase your swelling, especially within the first month post-surgery. In addition, changes in weather, especially heat, can cause you to swell more.

11. Is it Permanent? What happens if I need a touch up?

Fat transfers performed by Dr. Karam are a permanent procedure. Since it is a living graft it achieves a blood supply in the same way that a skin graft or hair graft would. Once that process of neovascularization (new blood supply) has been established, the fat grafts not only survive in their new environment but they thrive. This process can take several months to occur. The general rule of thumb is that whatever you have by 2-3 months is your lowest point. It will not get less, but you might see an increase in fullness over the following year as the fat grafts make the transition from survival to returning to their biological natural ways of storing fat. Very limited cases have ever needed another fat transfer touch up and it is always best to wait until at least one year after the surgery to see the true result before any touch up procedure is scheduled.

12. My skin is yellow? Why?

The yellow, green, and/or brown discolorations you might see are signs that your bruises are at the end of their healing phase. Typically within two weeks, everything is reabsorbed or excreted by the body, and the bruise disappears.

13. How long before the bruises go away?

Not all patients experience bruising with a fat transfer procedure. However, those who do will commonly experience bruising for about one to two weeks. Makeup and/or concealer can be applied to camouflage bruising, if needed. In cases of dark bruising or bruising that does not seem to be resolving, Dr. Karam will recommend that you see a laser specialist for treatment. This has been shown to speed up the healing process.

SKIN RESURFACING: CONTOUR TRL LASER/CHEMICAL PEEL

The Contour TRL laser and/or TCA chemical peel are used to reduce or eliminate problematic lines/ wrinkles and pigment irregularities. By stimulating production of new collagen, it will also improve the skin's overall thickness and resilience. The skin surface will regenerate new, healthy cells, giving your complexion a younger and more rejuvenated appearance. The depth of the treatment is dependent upon each individual's skin condition, desired outcome, and expectation of downtime. The procedure is performed in the office and will be customized to your specific skin goals. If combined with other surgical procedures, your Contour TRL or chemical peel will be performed last.

THESE TREATMENTS CAN HELP TREAT THE FOLLOWING CONDITIONS

- Deep wrinkles and lip lines (Contour TRL)
- Fine Lines
- Scars
- Sun Spots and Pigment Irregularities
- Actinic Keratosis
- Skin Tone/Texture

The number of treatments required may vary on an individual basis. A personalized plan will be created for your specific needs to give you the best results possible. (This plan could include multiple treatments, a combination of treatments, and/or treatments combined with specific skin care products).

PREPARATION FOR YOUR CONTOUR TRL OR CHEMICAL PEEL TREATMENT

- Please avoid ibuprofen, aspirin, fish oil, and other blood thinning products for two weeks prior to your laser procedure. This will decrease any possibility of excess bleeding or bruising.
- Please discontinue the use of retinol products 5-7 days prior to the procedure.
- For patient's with darker skin tones, pre-treatment with 4% hydroquinone will likely be recommended for all Contour TRL laser and TCA chemical peel procedures. Hydroquinone should be started 2-6 weeks prior to a scheduled procedure depending on the individual skin type.
- Please refrain from tobacco 6 weeks before, and 6 weeks after. Please refrain from alcohol 2 weeks before and 2 weeks after. Along with delayed healing, persistent skin redness and other complications may persist when tobacco and alcohol are not discontinued.
- Since your skin is the first barrier to infection, you will be prescribed an antibiotic to start the day before your procedure. Though infections are uncommon following this procedure, it is important to take the antibiotics as directed until the bottle is empty
- An antiviral medication will be prescribed to start one day prior to the procedure to prevent the occurrence of cold sores. It is important to take the antiviral as directed until the bottle is empty.

- Ativan, an anti-anxiety medication, may be prescribed if needed/desired. If taking Ativan, you must have someone available to drive you home from your procedure.
- On average, this procedure has a 10-14 day recovery time (downtime) depending on the depth and intensity of the treatment. Be sure to schedule your plans accordingly.

WHAT TO EXPECT

- It is normal to have swelling and redness for 10 -14 days after treatment. If swelling is severe, please call the office and we can prescribe a steroid to help decrease your swelling faster.
- Post-Inflammatory Hyperpigmentation (PIH) is a condition more common in darker skinned individuals that causes skin darkening and discoloration after a laser/peel treatment. This is a temporary occurrence and can be treated with hydroquinone, retinol, and in some situations a steroid.

CONTOUR TRL LASER/CHEMICAL PEEL INSTRUCTIONS

Items you need for post-procedure care:

- Aquaphor Ointment or Crisco
- 4x4 Sterile Gauze or Esthetician squares
- Popsicle Sticks
- Q-tips
- Distilled water
- White vinegar
- Cetaphil lotion
- Cetaphil cleanser

*Preparation of the vinegar-water solution for facial cleansing: ½ tablespoon white vinegar mixed with 1 cup of distilled water. Please put the solution in a spray bottle.

The first 24 hrs

- Ice packs as tolerated to reduce swelling and inflammation.
- Aquaphor ointment over entire resurfaced skin at all times.
- No washing of the resurfaced area

Post peel day 1 (wash skin 2x/day)

- Remove aquaphor ointment with Gauze or esthetician squares soaked in distilled water
- Clean skin with vinegar-water solution using Gauze or esthetician squares
- Allow vinegar-water solution to dry
- Apply aquaphor ointment
- Repeat 2 times during the day

Post peel days 2-9

- Perform above steps 4x/day
- Do not pull off peeling skin. Allow peeling skin to come off on its own while gently washing face
- Ok to shower after day 3. Use tepid water to rinse skin. No soaps. If planning on washing hair, use mild shampoo only. Try to avoid contact with face.
- Apply Aquaphor ointment at all times.

Post peel days 10

- Clean skin with Cetaphil cleanser instead of vinegar-water solution, if tolerated. If not, continue vinegar-water solution.
- Continue washing 4x/day
- Apply Aquaphor ointment at all times

Post peel days 11-30

- Cetaphil cleanser 2x/day
- Cetaphil lotion instead of aquaphor ointment
- Sunscreen with at least a 7% zinc
- Ok to begin applying natural, powder-based makeup with zinc oxide or titanium oxide.

oxygenetix

We recommend Oxygenetix makeup which is available for purchase in our office.

IMPORTANT POINTS ABOUT SKIN RESURFACING

1. Keep Aquaphor on the skin at all times like frosting on a cake. This ointment acts as a top layer over your skin which allows it to heal quickly and helps decrease the burning sensation.

2. Redness will go away in 2-4 weeks. Use Oxygenetix makeup to decrease the redness.

3. Showering is ok after 72 hours. Avoid hot water over the skin. Shampoo the hair with a mild product like Baby Shampoo.

4. Aquaphor can be messy. To clean it from hair, use Dawn Dishwasher Soap.

DISCHARGE & POST-OPERATIVE INSTRUCTIONS

If you were administered pre-operative oral medication, IV sedation, or general anesthesia for your procedure, you will most likely be drowsy for the remainder of the surgical day. **Do not drive, sign legal documentation, or operate heavy machinery for the rest of the surgical day**. When it is determined that you are ready for discharge after your procedure, you will be escorted to your responsible driver/ caretaker's vehicle via wheelchair from the surgery center.

When you arrive at your post-operative destination, it is important to eat a light snack before ingesting any prescription or pain medication. Doing so on an empty stomach may increase your chances of nausea and/or vomiting. When recovering from a general anesthesia case, it is important to start your diet slowly with clears/liquids/a light snack and gradually progress to a high protein/low sodium diet, as tolerated. A diet high in protein and low in sodium will promote healing and help to control the chances of unnecessary swelling post operatively.

POST-OPERATIVE INSTRUCTIONS

- Rest with head and shoulders elevated on at least two to three pillows for the first week. It can also be helpful to put a pillow under each arm to prevent you from rolling on one side or the other while sleeping.
- If your surgery involves a neck lift, it is important to avoid flexing your neck downward (reading, at rest, etc.) for three to four weeks post procedure for optimal results.
- Icing after a surgical procedure is an effective way to alleviate discomfort and control swelling. You
 may ice for 20 min. on and 20 minutes off as desired. It is important that the ice does not rest directly
 on the skin. Make sure you have a paper towel or barrier of sorts protecting your skin from the ice
 pack/frozen peas to avoid contact burns. Fat transfer patients may only ice for the first 48 hours
 following their procedure.
- Take 2 Tylenol every 6 hours as needed for discomfort, or use your prescribed pain medication for discomfort not alleviated by Tylenol. Do not take Tylenol and your prescription pain medication at the same time. While your prescription pain medication is effective for severe pain, it can cause constipation and increase your chances of nausea.
- Colace (stool softener) can be purchased over the counter to help alleviate constipation caused by pain medication.
- Take your antibiotics as directed until the bottle is empty. It is best to eat before taking your antibiotics to avoid stomach upset.
- You may resume driving after two or three days if you are feeling comfortable and alert. This is also provided that you are not taking narcotic pain medication and feel that your vision is in no way impaired by swelling or limited range of motion.
- Non-strenuous activity (such as walking) is allowed after 3-4 days. More strenuous activity such as swimming, jogging, tennis, golf etc. are not permitted for four weeks. You may return to your normal exercise or gym routine after three to four weeks.

Post-Operative Follow up Appointments

- Reassurance during the healing process is important and we want you to feel comfortable voicing
 any questions or concerns that may arise during your surgical recovery. In rare cases, there may
 be situations that require future intervention. Post-surgical follow-up appointments are important in
 order to manage your recovery process and ensure optimal surgical results. These appointments are
 intended to make sure healing is taking place appropriately, but more importantly to make sure all
 your questions and concerns are answered. If you skip your appointments and then come in with a
 concern, it is very possible that the ideal time to manage the issue could have been missed and the
 results may be compromised.
- If you need to cancel, it is extremely important that you let us know as soon as possible so that we can reschedule your appointment in a manner that better fits your schedule.

Post-Operative Follow up Appointments

For patients having a Vertical Restore, we schedule a 1 day post op appointment. You will be seen by our Post operative Care Specialists, Between day 2-5 day post op, compression sutures will be taken off depending on your healing. On your 4-5 day post-operative appointment, drains, eyes and lip lift sutures will be taken out by our post-operative team. Then you will return for a 7 days follow-up. At this appointment you will have the remainder of the sutures removed by our Post operative care specialist, Dr. Karam along with our Nurse Practitioner. If Dr. Karam is out of town, we will make other arrangements so that you will be able to see him. The next appointment will be scheduled with Dr. Karam at 6-8 weeks and 3 months. The three month appointment will be your combined with your Phase 2 Maintenance and Skin Consultation (discussed later). A 12 month appointment will be scheduled for photos and to touch base about the results. This appointment will be set with our Post operative Care Specialists and with our Nurse Practitioner if needed. The purpose of meeting is to have a 1 year check and to make sure any concerns you have related to your procedures are addressed. If an additional appointment needs to be made with Dr. Karam, we will make it for you at that time.

If any questions or concerns arise between appointment intervals, please always feel free to contact our office or email us at postop@drkaram.com so your thoughts and concerns can be addressed. We are happy to set up an appointment for you to be seen in our office if you ever desire to be seen in between these pre-scheduled follow-up appointments.

*For out of town patients who can't come in for their regular follow-up appointments in our office, we expect and encourage you to see up a phone follow-up with photos emailed so that we can monitor your progress. We can get on the phone to discuss any concerns you may have.

PHASES OF HEALING: ONE WEEK AND BEYOND

At the one week mark, you are well on your way to recovery and healing. You can see the light at the end of the tunnel and will feel like you can start to recognize yourself again. Most people feel comfortable getting back to their work and social life around two weeks after surgery. It is crucial to realize that everyone does heal at different rates. Some patients heal sooner than two weeks and for others it may take a bit longer. The most important point to remember is that everyone does heal and eventually looks great.

Swelling: It is normal to have overall swelling, irregularities, asymmetry, residual bruising, discoloration, and tightness. You will start to notice that with every day that goes by, things will continue to improve. By the time you are about one month post-op, things will be looking really good. Some treated areas may still be firm to touch. For example, the area where the Vertical Restore was performed may be hard for a solid 2 months and then start to soften by 3-4 months. You may not necessarily look swollen to others, but you still probably are. Swelling may also be more pronounced in certain areas. In some cases, the sides of the face will have lumpiness or differences between the two sides. This is normal and will resolve itself as healing progresses in a few weeks.

Bruising: After about two weeks, bruising in the majority of cases has resolved. The bruise goes through color changes from dark purple/black, to maroon, to green, and finally to yellow. Occasionally, there are some bruises that are very slow to resolve. These unusually prolonged bruises can take months to go away. The good news is these type of bruises are very rare and with time they do go away.

Cover-up and Makeup: The discoloration and bruising can be covered up with the use of make-up. Breathable post-surgical make-up is available at our office (Oxygenetics makeup). This makeup can be customized to your skin tone and will function as a base. Our staff can help you with this at the 1 week visit or you can come in any time after your procedure to get matched. It is important to use only mineralbased make up on your fresh incisions. If a chemical peel or laser skin resurfacing was performed, makeup can be started by 2 weeks, once the skin has healed. Otherwise, makeup can be applied by one week.

Numbness: Numbness mainly relates to the Vertical Restore procedures. Numbness is expected and normal over the skin of the cheeks, temple, and neck. Any time skin is separated from the underlying tissues, the nerves are disrupted temporarily. Sensation is expected to return by 3-4 months in most cases and by 6-12 months in essentially all cases. It is important to initially avoid hot objects (hot compresses, curling irons, etc.) to avoid any burn injuries to the skin. The same is true for ice. Ice can cause the same type of thermal injury as heat so prolonged use of direct ice should be avoided. As a rule, frozen peas or frozen gel packs with a paper towel or washcloth barrier between the object and the skin are best and safest.

Exercise: Early exercising can cause prolonged swelling and if started prematurely, can cause issues with bleeding. Light exercise can resume after three weeks (light walking, biking). Full exercise can resume after four weeks. Always listen to your body when first getting started. If a certain activity results in swelling and/or discomfort, avoid it until it starts to feels better. It is important for your health and mind to get started on your daily exercise routine, so don't hesitate to get back into it at the proper phase of healing.

Sexual activity: Sexual activity follows the same time course and precautions as exercise. Please wait 4 weeks after your procedure.

THE PHASES OF YOUR INCISION

Incisions go through several phases during the healing process. At first, when the stiches are removed, they will look bumpy and a little irregular. This is because of the way the incisions are being held together by the sutures coupled with swelling. When the sutures come out, things start to flatten out over the upcoming days and weeks. By week two, the incisions will be red in color. Some parts of the incision will be a darker red than others. For example, the area by the temple/hairline and neck usually appears to be a more distinct red than around the front of the ear. Eyelid incisions generally heal faster than facelift incisions. The redness is at its peak during the inflammatory phase of wound healing which is generally between the 2nd and 8th week after surgery. This is because the body is bringing in new blood vessels and collagen. As a result, the incisions will look darker and a bit more raised. Then after 8 weeks, the incisions will start to stabilize, settle and become less noticeable.

In some cases, the incisions will be hardly noticeable by 1 year. Depending on skin type, genetics and sun exposure/UV protection during healing, the incisions may range from almost invisible, to noticeable. There is no way to predict where you will fall along the spectrum. For the vast majority of our surgical patients, the incisions are not an issue that concerns them. Lasers can be used in some cases to help as well if needed after all healing has taken place. Very rarely, is a scar revision required.

It is important to know that although every effort is made to reduce the appearance of a post-operative scar, in all cases, there will inevitably be a scar. That is simply how the body heals from an incision. Keep in mind none of the desired surgical results can be achieved without an incision and the resultant scar.

HOW TO CARE FOR YOUR INCISION

Sunblock: The most important thing to do after surgery is to keep the incisions out of the sun. A full spectrum sun screen is required and needs to be applied to the incisions 2-3 times per day for the first year. On days when you will spend a lot of time in the direct sun, it is good practice to where a hat. Prolonged sun exposure can make the incisions lighter or darker than the adjacent skin. We carry excellent full spectrum sunscreen (with a tint if desired) which can be purchased during your follow-up.

Scar Gel: A silicone based scar gel is another important way to help reduce your scar and minimize the chance of hypertrophic scaring and keloids. It also can help speed up the resolution of the incision. We carry medical grade silicone scar gel in the office. This will ideally be started 48 hours after your sutures are removed from your incisions.

Makeup: You are going to want to cover-up your incisions during the post op phase until redness settles down. Chemical based make-ups should not be applied to the incisions because they can irritate the incisions. Mineral-based and breathable makeup is the best and safest. We can discuss options with you at the 1 week appointment.

When to restart skin care: If laser resurfacing or a chemical peel was performed, you can restart your skin care regimen (including retinols) after three weeks. If skin resurfacing was not performed, you can restart two weeks post procedure.

PHASE 2 MAINTAINING YOUR SURGICAL RESULTS: THE CVIP MEMBERSHIP PROGRAM

Like anything else in life, maintenance is an important part of keep things looking great over time. Although, your procedure is going to turn back the clock in a significant way, the results don't last forever and aging is a constant current. However, there are some very important things you can do to retain your results and keep appearance looking its best for as long as possible.

The changes to the foundation of the face and volume will continue to slowly the aging process over your lifetime. The skin however needs constant input to keep it looking good over time. For this purpose, the post procedure phase is primarily focused on keeping the skin healthy and youthful. This requires regular treatments to maintain the skin the same way you need to maintain everything else in your life (eg. Your body, your home, your garden). The skin is no different.

We have created a simple program that involves three basic components:

1. Skin care products designed to help keep skin healthy in combination to sun protection.

2. Regular skin treatments design to override the skins lack of collagen production. These are specifically designed according to your skins needs.

3. Botox to reduce lines and wrinkles in your upper face. At your 3 month appointment with Dr. Karam, you will first start with a Skin Analysis and Maintenance Consultation.

3 month skin analysis and maintenance consultation

At this visit you will meet with one of our Anti-Aging Skin Specialists. The appointment starts with a VISIA Digital Skin Analysis. Think of this as a MRI for the skin. We will obtain information related to the degree of sun damage and overall skin health and age. Based on this, we will put together a plan specific to your needs. This plan will consist of collagen stimulating procedures with little to no down-time to wrinkle prevention procedures like Botox. These are at the core of the program. Other procedures are added to remove discoloration and sun damage.

Collagen stimulation for prevention and maintenance

As skin ages, collagen synthesis begins to diminish. This leads to skin thinning, wrinkles, and sagging. When we are young, collagen is made by the skin cells (fibroblasts), and with age this process slows down dramatically. An essential part of long term anti-aging is to do things that will increase collagen synthesis. Use of active skin care with growth factors coupled with Hydrafacials, microneedling, light chemical peels, and Forever Young BBLs are important and effective ways to stimulate collagen and create a youthful appearance. With the regular use of these products and treatments, your skin will get better and better year after year. Maintaining good skin integrity is key to prolonging your surgical facial rejuvenation results.

Botox and injectable fillers

Lines and wrinkles in the upper face are formed as a result of the combination of repetitive movement and thinning skin. These lead to static wrinkles (wrinkles that are there even when you are not expressing). Botox used every 3-4 months is an important and effective way of reducing the rate of wrinkle formation and even prevent it all together. (Lines and wrinkles that form in the forehead for example are very hard to treat and best managed by Botox used on a consistent basis). Lines and wrinkles in other parts of the face caused by aging, repetitive movement, years of laugh or smile lines, and photo damage may require filler products as a way to establish a smooth, youthful appearance. Many of these products last for several months and are incredibly successful in achieving your desired skin care/post-surgical results.

CARMEL VALLEY FACIAL PLASTIC SURGERY REVISION POLICY

It is important to remember that perfection is not a realistic expectation and that each patient's bone structure, build, and other individual traits present certain limitations. There are limitations as to what cosmetic surgery can achieve. Your safety and satisfaction are the most important things to us. Dr. Karam is committed to delivering you the best possible surgical result and although he cannot guarantee a specific result, he can promise that he will work with you until you are satisfied with the outcome of your procedure. It is important to understand that an unsatisfactory outcome is not necessarily the fault of Dr. Karam or the patient. Occasionally, things can go wrong with the surgery in ways that are out of the surgeon's control (i.e. Hypertrophic or keloid scarring, prolonged swelling, infections, severe bruising, etc)

Although the vast majority of patients will have a smooth and uneventful postoperative course with an excellent outcome, there occasionally is a need for a "touch up" or "revision" of the original procedure. Dr. Karam believes that most patients should not have any revision surgery until at least 12 months and sometimes longer after their surgery, as there can be dramatic changes, which occur within the first year after surgery as part if the healing process. This may vary slightly from one type of surgery to another, and different doctors may have different guidelines as to when they operate again.

If a revision procedure is required within the first year, Dr. Karam will usually not charge a surgeon's fee for the procedure, but you will be responsible for the operating room and anesthesia fees. The revision fees for procedures are approximately \$1950 depending on the nature of the revision. If general anesthesia is required, the general anesthesia provider will bill accordingly.

MEDICATIONS TO AVOID BEFORE AND AFTER SURGERY

For 14 days prior to surgery and a minimum of 14 days after surgery, **Do not take aspirin, aspirin containing products, or ibuprofen**. Do not take any anti-inflammatory agents or Vitamin E before surgery. Even the smallest amounts of aspirin can cause bleeding problems. You may only take Tylenol (acetaminophen) and other Tylenol products.

The following products CANNOT be taken before or after surgery:

4 way cold tablets A-A Compound ACA Accutane Accutrim Acetabar Acetasem Actifed Adapin Advil Alka Seltzer Aleve Allygesic Alrpine Aluprin Amsodyne Anacin Anaprox Anexsia with codeine Anisindione Anodynos Ansaid Antiten Anturane APAC APC Arthritis pain formula ASA Asacol Ascodeen Ascriptin Aspadine Aspergum Asphac-G Aspirin Astoka Axotal Azdone B-A-C **Bayer products** Bexaphene Bi Act Billberry (vacciniummyrtillus) Bitrin BUF Buff-A Buffadyne Buffaprin Bufferin **Buffinol** Butazolidin Cadasa Cafacetin Calciparine CAMA Arthritis Carpon Cayenne (capsicum annum) Celebrex Cephalgesic Cheracol

Childrens' Advil Christodyne Clinoril Coastalgesic Colrex Congespirin Contact Cope Copricidin Cortisone Cosprin Coumadin Counterpain CP2 Damason-P Daprisal Darvon Dasicon Day Pro Decojen Dedache Defencin DeWitt's Pills Dicumerol Di-Gesic Dimetan Disprin Dihvdrocodeine Disalcid Doan's Pills Dolobid Dolprin #3 Tablets Dolor Dong Quai (angelica sinesis) Dover's Powder Doxaphene **Double-A** Tablets Drinophen Dristamead Dristin Duradyne Duragesic Dvnosol Easprin Echinacea Ecotrin Edrisal Elavil Emaarin **Ematrin Forte** Empirin Emprazil Fmprin Endep Enoxaparin Injection Entab 650 Equagesic Equagesic Equazine M Etrafon

Excedrin Febrinette Feldene Fendol Fenfluramine (Pondimin) Feverfew (tanacetumparthenium) Fiorgesic Fiorgen PF Fiorinal Fish Oil Caps Flax Seed Flax Seed Oil Forbutol Furadantin Garlic Tablets Gelcoid **Gelprin Tablets** Gemnisyn Tablets Gentrel Gennin Genoprin Ginaer GinkoBiloba Ginseng (panaxpinseng) Goody's Powder Halfprin Haltran Haysma Heparin Hepto Histalyl with ASA Hyco-Pap Hypan lbu-Tab Indocin I-PAC Isobarb Isolly Lanorinal Liquiprin Lodine Lortab ASA Lovenox Injection Macrodantin Magan Magnaprin Marnal Measurin Meclome Mediprin Mellaril Mepro Compound Tablets Meprobarnate Meprogesic Methcarbamol with Aspirin Midol Mirandon Mobidin Mobigesic

Momentum Monacet Monoaesic Motrin Mysteclin F Nalfon Nalproxyn Naprosyn Naproxyn Nardil Norgesic Novahistine with APC Norwich Nuprin Opasal Orabase Orphenogesic Orudis Oscalgesic Oxalid Pabalate Pabirin PAC Pamelor Pamelor Pamprin Pan-PAC Panwarfin Parnate Pasibar PediaProfen PeptoBismol Percobarb Percodan/PercodanDemi Persantin Persistin Phenaphen Phenotron Phentermine Phenylpropanolamine Piroxicam Plaquenil Plegine Ponstel Prednisone Presalin Propadrine Propxyphene Propadrine Protamine Protension Provil Pyrroxate Quiet World Relafen Rhinate Rhinex Rhinocaps Riona Robaxisal Rufen

Ru-Lor-N Ru-Tuss SAC Tablets Salatin Saleto Sal-Fayne Salfex Salicylates Salocol Salphenine Salsalate Salsitab Salsprin Sine-Aid IB Sine-Off Sinequan Sinex Sinutab SK-65 Soltice Soma Compound Sparine Stanback Stelazine Stenden Supac Super-Anahist Surmontil Synalgos-DC Tabloid APC Talwin Tandearil Tempanil Ten-Shun Tenuate/ TenuateDospan Thorazine Tofranil Tolectin Toradol Trendar Triaminic Triavil Triaesic Trilisare Trilisate Ursinus Vanquish Vantrin Van-Trol-Nol Verin Vioxx Virbamycin Viro-med Voltaren Warfaren Zactrin Zomax Zorpin

(This is not a complete list of aspirin and ibuprofen products. Please also be advised that it highly important that you discuss all medications and supplements during your pre-operative appointment).

Please contact our office before taking any medications 2 weeks prior to surgery and 2 weeks after surgery. Please avoid multi-vitamins, diet pills, homeopathic medications, herbal remedies, and herbal teas.