

AMIR M. KARAM, MD

PRE AND POST OPERATIVE GUIDE

YOUR FACIAL REJUVENATION PROCEDURES

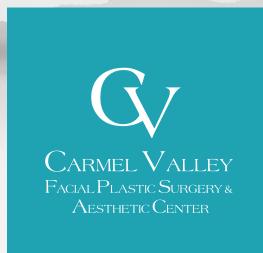


TABLE OF CONTENTS

Contact Information	1
Introduction	2
Letter from Dr. Karam	
Surgical Timeline	4
Preparing for Surgery	5
Preparing for SurgeryPreparing for Your Procedure	6
Surgical Prep Spreadsheet	7
What to Expect	8
Vertical Restore and Vertical Prevent	
Vertical Restore and Vertical Prevent FAQ	11
Modified Lip Lift	12
Upper and Lower Blepharoplasty/Lower Lid Skin Pinch	13
Upper and Lower Blepharoplasty/Lower Lid Skin Pinch FAQ	14
Fat Transfer	
Fat Transfer FAQ	16
Skin Resurfacing: Contour TRL Laser/Chemical Peel	17
Discharge & Post-operative Instructions	20
Phases of Healing: One Week and Beyond	22
Phase 2 Maintaining Your Surgical Results: The CVip Membership Program	24
Carmel Valley Facial Plastic Surgery Revision Policy	
Medications to Avoid Before and After Surgery	26

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
 Dr. Karam Cell: 858.353.9885

 Office Fax: 858.259.3221
 Dr. Karam Home: 858.356.9291

 Email: Postop@drkaram.com
 Dr. Neda Vossoughi: 949.370.6332

After Hours - Emergency Only: 858.210.7370

(Please note this is an emergency line that will contact the staff if you have a hematoma. They have no affiliation with the practice.)

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 and 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 and expectiations 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 your 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.

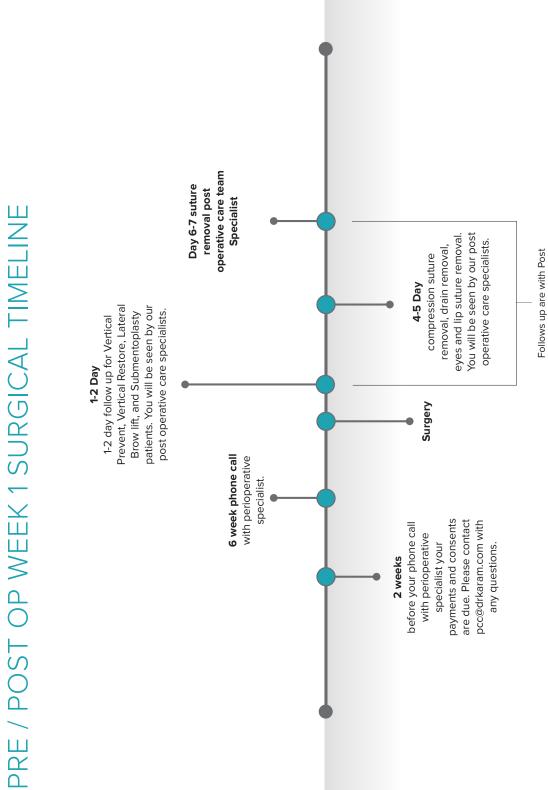
Phase 2: This refers to maintaining your results. We know aging is a continuous process and your investment in Phase 1 is significant. We have learned over the years that actively maintaining your skin will slow the aging process significantly as well as help your skin look younger with each passing 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,

Dr. Amir M. Karam



operative Team.

PREPARING FOR SURGERY

WHAT YOU NEED TO PURCHASE

Ceneral	
□ Aquaphor and or Dr Karam's Enrich □ Hydrogen Peroxide □ 6-8 Frozen Pea Bags □ Q-Tips	
□ Hibiclens Soap □ Dial Antibacterial Soap □ Gauze □ Paper Towels □ Soft diet foods e.g. yo	gurt
smoothies, bananas, oatmeal □ Baby shampoo □ Small bottle dawn soap □ Arnica □ Bromelaiı	n

If having Laser or Chemical Peel

⊔ Spray bottle L	Aquapnor Ointm	ent or Crisco 🗆 Q	-tips ⊔ 4x4 Gauze
□ Distilled water	\square White vinegar	\square Cetaphil lotion	□ Cetaphil cleanser

What we provide

Conoral

☐ Eye Ointment (if needed) ☐ 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 impacts the healing process. If you are a smoker/nicotine user it is advised that you discontinue smoking/nicotine eight weeks prior to and for at least six weeks after your procedure. This also includes vaping, nicotine patches and gum.

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 poor healing and/or bleeding complications.

Vitamins: Stop all 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 bleeding. Please refrain from juices, elixirs and wellness shots during this time as well. You can purchase Arnica and Bromelain from Amazon.

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. Please note: If you have a history of cold sores, or having laser done, you must take the antiviral.

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 by our office, please start this 1 week before your procedure and continue for 2 weeks after.

Cleansing: Wash your face, neck, and hair with Hibiclens antibacterial soap the night before your surgery. Please take off 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 blow dry your hair

Do not eat or drink 6 hours prior to procedure: For IV Sedation cases, it is okay to take Ativan and Zofran 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 before surgery. (Local anesthesia cases without IV sedation may drink or consume a light meal the morning of their surgery).

Confirm surgical arrival time: We will notify you the day before your surgery to confirm your arrival 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 with Hibiclens 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. You can wear a bra and underwear during surgery, but please make sure that the bra/underwear doesn't have any metal on it. Please make sure to wear dark colored clothing, to prevent staining.

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.

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 for 24 hours after. We cannot legally 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 if this fails to happen.

SURGICAL PREP SHEET: TWO WEEKS PRIOR TO SURGERY AND BEYOND

2 caps. Bromelain 3x/day 3 tabs. Arnica 3xday 1 antiviral (if applicable) 2x/day 1 antibiotic 3x/day Hibiclens Soap Wash 1 Ativan/ 1 Zofran 1 hour prior to surg. Surgery*** (Confirm Arrival Time) Leave bandage "on" for 24 hrs. Apply Aquaphor 2x/day Apply eye drops 3x/day Apply eye ointment before sleep Remove Aquaphor/Clean/Reapply 2x/day					
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Apply eye ointment before sleep Remove Aquaphor/Clean/Reapply 2x/day					
Remove Aquaphor/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.)					
No over the counter supplements					

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 help 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 1-4 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 will 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 sites 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 line.

Nausea/Vomiting: Nausea is not uncommon, especially following IV or general anesthesia procedures. To help prevent this unpleasant side effect of surgery, Zofran will be prescribed to you during your preop visit for any 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 normal 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 will be provided at your one week post-operative visit 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 OUR OFFICE DURING OFFICE HOURS OR DR. KARAM IMMEDIATELY AFTER HOURS 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: 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 their own, but for more severe cases, this will require drainage or even possible surgical intervention. This is why Dr. Karam uses compression sutures.

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

Complications after Lower Blepharoplasty: Severe swelling, pain, or loss of vision could indicate a hematoma and this is a true emergency. If these symptoms develop, contact the office during business hours or Dr. Karam immediately after hours or weekends. On the off chance you are unable to get ahold of Dr. Karam or the 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 procedures 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 team 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 paper towels as a barrier between your skin and the frozen peas bags 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 and reapplied with a new one. After this, you will go home, rest, and start cleaning on your own the next day. At this 48 hour mark, you will take off the dressing. You do not have to reapply dressing at this point.

Compression Sutures: Dr. Karam will 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 4-5 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. If you had the laser
 in surgery, you must wait 72 hours to shower. Once you get your drains removed, you will need to wait
 an additional 48 hours to shower, so we reccomend washing your hair right before your drain removal
 appointment.

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 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 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.

VERTICAL RESTORE/PREVENT FAQ:

1. How long until the incisions heal?

Everyone heals at a different rate, but, incisions look the worst between weeks 2-8. They will continue to improve up to one year following the procedure. It is typically 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. 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. 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 to provide some relief. There is no increased risk of infection or negative result 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, or in some cases up to 1 year.

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 long lasting because your facial muscles are quite literally lifted and tightened in a more youthful position. You will typically experience this for 4-6 weeks, before it starts to improve.

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 a difficult question to answer because it is hard to define "lasting". This procedure 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 14 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 Bare Minerals or any mineral makeup. 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 day 9 after surgery, covering your incision lines as well. We recommend EltaMD sunblock which provides the necessary level of protection and can be purchased in our office. We will also provide you with a bottle of EltaMD sunscreen one week post op. Please be mindful to discontinue any products if your skin becomes 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. We will provide this for you at your one week post op. It can be used twice a day until the bottle is finished. REMEMBER, you only need a small amount of product for your incisions. Be sure to clean all incisions before application.

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 can be related to a hair growing into the incision line or a stitch that is sticking out. If you are in San Diego, make an appointment to see one of our post-operative specialists and they will take care of it. If you are 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 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 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 eyes during and following surgery. Contacts may be used again 2 weeks after 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.

Bruising and Swelling: It is normal and expected that both bruising and swelling will peak between days 4-6 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 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 4/5 day 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, but, incisions look the worst between weeks 2-8. 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. Contacts may be used again 2 weeks after surgery.

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. 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 is 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.

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 by using the patient's own fat cells.

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 will generally peak days 4-6 and will improve after 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, often related to swelling. Avoid bending over, looking down, or heavy lifting, as this helps to avoid excess swelling to 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.

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 2 weeks post-surgery. There will be sutures that will be removed post op day 7. You may have a bump at this donor site, that can take up to one year to subside.

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

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 3 months or more 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 7000 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. **The goal of the fat transfer procedure is achieve improvement and natural outcome.**

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. 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.

6. Where is the fat harvested?

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

7. 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.

8. 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. Touch ups are rarely if ever needed.

9. 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 can cause you to swell more.

10. 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 requested.

11. 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 starts to disappear.

12. 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.

Based on the condition of your skin. 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. Stopped 7 days before
 laser
- 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 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:

1/2 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 day 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.

We recommend that you pre- purchase new make up that is 100% mineral based with new brushes. After 14 days of your procedure, you may resume any makeup you'd like.

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 cover 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 4 weeks. It
 can also be helpful to put a pillow under each arm to prevent you from rolling on your side 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 minutes 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.

• Strenuous activity such as power walking, swimming, jogging, tennis, golf etc. are not permitted for four weeks. You may return to your normal exercise or gym routine after 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 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 of your questions and concerns are answered. If you skip 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.

*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 2 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 heals at different rates. Some patients heal sooner 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. At one month, most people feel good about their healing process and notice that their swelling has gone down significantly. 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 new bruises or 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. It is important to use only mineral-based make up on your fresh incisions. If a chemical peel or laser skin resurfacing was performed, makeup can be started, once the skin has healed.

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 wear 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 will be given 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

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 slow 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. KaramMD Skin Trifecta designed to help keep skin healthy in combination with sun protection.
- **2.** Regular skin treatments designed 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.

KaramMD Skin Trifecta subscription

Over the course of several years, Dr. Karam has been working to develop a proprietary set of products that we refer to as The Karam Trifecta. Developed in one of the country's most highly advanced skincare labs, this highly specialized skincare regimen is truly one of a kind and the simplest routine you've ever used, packed with all the ingredients you need. We've honed and refined these formulas to bring you the most advanced and effective skincare possible, without requiring that you deal with an entire shelf's worth of expensive, complicated products that'll take a ton of time out of your daily routine. When we say "simple and effective", we mean it. Formulated with a series of active ingredients that will brighten your skin to leave you glowing, the Karam Trifecta does the work of a series of products that would normally cost you three to four times as much. Our goal, like our skincare, is simple. We believe that skincare should be affordable, easy and accessible because everyone deserves to both look and feel their very best every single day. Dr. Karam truly feels every surgical patient should start on the Trifecta well before their surgical date, and continue with the Trifecta 2 after their procedure.

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 KaramMD Skin Trifecta 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).

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 rarely 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 of 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 and facility fees for procedures can vary, depending on the nature of the revision. If general anesthesia is requested, 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 Childrens' Advil Excedrin Momentum Ru-Lor-N A-A Compound Christodyne Febrinette Monacet Ru-Tuss ACA Clinoril Feldene Monogesic **SAC Tablets** Accutane Coastalgesic Fendol Motrin Salatin Fenfluramine Mysteclin F Accutrim Colrex Saleto (Pondimin) Acetabar Congespirin Nalfon Sal-Fayne Contact Feverfew Salfex Acetasem Nalproxyn (tanacetumparthenium) Actifed Cope Naprosyn Salicylates Copricidin Fioraesic Naproxyn Salocol Adapin Fiorgen PF Cortisone Nardil Salphenine Advil Fiorinal Salsalate Alka Seltzer Cosprin Norgesic Fish Oil Caps Coumadin Novahistine with APC Salsitab Aleve Flax Seed Allygesic Counterpain Norwich Salsprin Flax Seed Oil Alrpine CP2 Sine-Aid IB Nuprin Forbutol Aluprin Damason-P Opasal Sine-Off Furadantin Daprisal Amsodyne Orabase Sinequan Garlic Tablets Darvon Orphenogesic Anacin Sinex Gelcoid Anaprox Dasicon Orudis Sinutab **Gelprin Tablets** Anexsia with codeine Day Pro Oscalgesic SK-65 Gemnisyn Tablets Anisindione Decojen Oxalid Soltice Gentrel Anodynos Dedache Pabalate Soma Compound Gennin Ansaid Defencin Pabirin Sparine Genoprin DeWitt's Pills Antiten PAC Stanback Ginger Anturane Dicumerol Pamelor Stelazine GinkoBiloba **APAC** Di-Gesic Pamelor Stenden Ginseng (panaxpinseng) APC Dimetan Pamprin Supac Goody's Powder Arthritis pain formula Disprin Pan-PAC Super-Anahist Halfprin Dihvdrocodeine Panwarfin ASA Surmontil Haltran Asacol Disalcid Parnate Synalgos-DC Haysma Ascodeen Doan's Pills Tabloid APC Pasibar Heparin Ascriptin Dolobid PediaProfen Talwin Hepto Aspadine Dolprin #3 Tablets Tandearil PeptoBismol Histalyl with ASA Aspergum Dolor Percobarb Tempanil Hyco-Pap Asphac-G Dong Quai Percodan/PercodanDemi Ten-Shun Hypan (angelica sinesis) Aspirin Persantin Tenuate/ Ibu-Tab Dover's Powder TenuateDospan Astoka Persistin Indocin Doxaphene Phenaphen Thorazine Axotal I-PAC Azdone **Double-A Tablets** Phenotron Tofranil Isobarb Drinophen Tolectin B-A-C Phentermine Isolly Dristamead Toradol Bayer products Phenylpropanolamine Lanorinal Dristin Trendar Bexaphene Piroxicam Liquiprin Duradyne Triaminic Bi Act Plaquenil Lodine Duragesic Triavil Billberry Plegine Lortab ASA (vacciniummyrtillus) Dvnosol Triaesic Ponstel Lovenox Injection Bitrin Easprin Trilisare Prednisone Macrodantin BUF Echinacea Trilisate Presalin Magan Buff-A **Ecotrin** Ursinus Propadrine Magnaprin Buffadyne Edrisal Vanguish Propxyphene Marnal Buffaprin Elavil Vantrin Propadrine Bufferin Measurin Van-Trol-Nol **Emagrin** Protamine Buffinol **Ematrin Forte** Meclome Verin Protension Mediprin Butazolidin **Empirin** Vioxx Provil Mellaril Cadasa Emprazil Virbamycin Pyrroxate Mepro Compound Tablets Cafacetin Emprin Viro-med Quiet World Meprobarnate Calciparine Endep Voltaren Relafen Meprogesic **Enoxaparin Injection** Warfaren **CAMA Arthritis** Rhinate Methcarbamol with Aspirin Entab 650 Rhinex Zactrin Midol Cayenne (capsicum annum) Equagesic Zomax Rhinocaps Mirandon Equagesic Celebrex Zorpin Riona Mobidin Cephalgesic Equazine M Robaxisal Mobigesic Cheracol Etrafon Rufen

(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.