



THE PRE-OPERATIVE SESSION™ PRE-OPERATIVE INSTRUCTIONS FOR MEDIAL THIGH LIFT

Please watch the following video, which corresponds with the instructions below:

- General pre- and post-operative instructions for body surgery <https://youtu.be/sqSs7Nifrs>

FOUR WEEKS BEFORE AND AFTER SURGERY:

- You will need to refrain from all nicotine products, including cigarettes, pipe tobacco, chew or “the patch.” Nicotine interferes with healthy circulation and may affect the result of your surgery. It also places you at higher risk of complications when receiving anesthesia.

THREE WEEKS BEFORE SURGERY:

- Based on your individualized assessment, we may request for laboratory tests and/or EKG. If you are having testing at a lab other than the one we suggested, you are responsible for having the hard copy results arrive at our office one full week before surgery (our fax number is 585-271-4786).
- A mammogram done within the past year is required for any female at or over the age of 35 for any type of breast surgery.
- **SURGERY WILL NEED TO BE CANCELLED IF THERE IS ANY CHANCE THAT YOU ARE PREGNANT.**
- All fees are due, including surgical, facility and anesthesia.

TWO WEEKS BEFORE SURGERY:

- We ask that you do not take any products that “thin the blood” in order to minimize bleeding during and after surgery. For example, avoid products containing aspirin, ibuprofen (Advil, Motrin, Aleve), non-steroidal anti-inflammatory medication or Vitamin E. However, Tylenol is acceptable. Many herbal supplements and vitamins found over the counter may also increase bleeding risk. For this reason, we ask that you provide the names of all prescription and over the counter products you use or take. At your pre-operative visit, we will instruct you on when to restart these products.
- If your destination after surgery is more than 30 minutes from the Lindsay House Surgery Center, you must make arrangements to stay in a hotel or at the Carriage House on the night following surgery. A list of hotels can be obtained from our patient care coordinator.

ONE WEEK BEFORE SURGERY:

- Do not drink alcohol.
- Please ensure that all required laboratory tests and/or imaging have been completed by this time. Our fax number is 585-271-4786.
- Please stop applying self-tanner if used.

THE DAY BEFORE SURGERY:

- The Surgery Center will call you after noon to inform you of your arrival time for surgery.
- **DO NOT EAT OR DRINK ANYTHING AFTER MIDNIGHT** (This includes water and gum chewing). Surgery may be cancelled if this is not followed. A fasting state is required in order to receive sedation for surgery, unless you are instructed to take a specific medication with a small sip of water the morning of surgery.

DAY OF SURGERY:

- Go to Suite 101 (Lindsay House Surgery Center).
- You may shower and shampoo the morning of surgery.
- Do not wear makeup or use hair sprays/gels.
- **NO ACRYLIC NAILS OR NAIL POLISH (INCLUDING GEL/POWDER). NO EYELASH EXTENSIONS OR MASCARA (flammable).**
- Do not wear contact lenses. Glasses are ok to wear.
- Avoid clothing that must be pulled over the head. Wear loose fitting clothing (button down or zip up).
- If you wear dentures, please leave them in place.
- Do not wear jewelry (including body jewelry) or bring valuables to surgery.
- If you have your menses, please wear a feminine napkin not a tampon.

GENERAL POST-OPERATIVE INSTRUCTIONS

- **A responsible adult must provide transportation for you after surgery (public transportation is not permissible). He/she must stay with you overnight and after surgery until the morning following the procedure. If you are having several procedures, you may need or prefer assistance for 1-2 days following your procedure.**
- Avoid making major decisions or participating in activities that require judgment for 24 hours.
- Take all medications as instructed.
- Do not drive for the first 24 hours after surgery or while you are taking narcotics. Full clearance to drive will be based on procedure and your surgeon's instruction.
- Do not consume alcohol for **1 week** after surgery or while taking narcotics
- At your pre-op visit, you will receive an incentive spirometer, which is a breathing device that will help you take slow, deep breaths to expand and fill your lungs with air. This will prevent post-operative lung complications, such as pneumonia and atelectasis (lung collapse). You should use your incentive spirometer **10 times every hour** while awake for the first few days after surgery.
- Slight temperature elevation during the first 48 hours after surgery is a natural consequence of the body's reaction to surgical trauma. The Tylenol you take post operatively (either alone or in your pain medication) should control mild fevers. If the temperature is over 101, most of the time the cause is not walking or doing the incentive spirometry breathing treatments enough. Call us if your temperature stays higher than 101.5 for more than 4 hours and does not respond to walking, deep breathing and coughing
- Drink plenty of fluids (8-10 glasses/day) for the first couple of weeks after surgery as this will help you to remain well hydrated and reduce swelling.
- Staying well hydrated will help prevent post-operative constipation. It is common not to have a bowel movement for 2-5 days after surgery due to slower motility of the gastrointestinal system. This is usually due to the medications you receive during surgery as well as post-operative pain medication. In addition to drinking plenty of water, take Colace (a stool softener recommended at your pre-op visit) and taper pain medication as soon as possible. Occasionally, a stronger medication for constipation, such as Dulcolax tablets or Magnesium Citrate may be necessary.
- If you have not urinated after 6 hours of being home from surgery, please contact our office.
- If you are wearing a compression garment, using a funnel to direct urine flow may help keep the garment dry.
- Limit your activities for the first 24 hours after surgery as you may feel tired for the first few days. Walk for short distances during the first 24 hours after surgery to promote blood flow in the lower body and prevent blood clots. In order to further prevent blood clot formation, we encourage you to pump legs while lying down. You will also be given supportive stockings the day of surgery, which you should wear consistently for 1 week after surgery.
- You will have physical activity restrictions post operatively, which includes exercise and sexual activity. Return to physical activity will depend on the type of surgery you are having done and will be further discussed with your surgeon.
- During the first few weeks following surgery it is common to weigh more than before surgery due to swelling and extra fluid. This will resolve over time.
- No swimming or hot tub usage for at least **2 weeks** after surgery – this may also be further discussed with your surgeon
- Avoid direct sunlight to the incision for at least 1 year. Use a sunscreen with zinc oxide with an SPF of 20 or greater to help decrease the visibility of the scar.

POST-OPERATIVE CARE FOR MEDIAL THIGH LIFT

- When you wake from surgery your thighs will be wrapped with ACE bandages or you will be placed in a compression garment or thigh high Teds stockings. The incisions will be covered with steri-strips and gauze.
- For the first week, it is very important that you keep your legs elevated to help control swelling.
- We expect minor bloody drainage for the first 72 hours. You will have gauze that can be change as needed.
- After surgery you will have 1 drain per leg. Drains help to remove excess fluid and the amount of drainage will determine how long the drains will be left in place. Typically, both drains are removed after a couple days. Follow the separate instruction sheet on documenting drainage. Please view video: JP Drain Maintenance <https://youtu.be/gpOFTvZRbV0>
- After the drains are removed, you may shower and get your incisions wet. Pat them dry with a soft towel or use a blow dryer on cool setting to dry them. You will need help with your first shower.
- Keep the steri-strips in place on your incisions until they fall off on their own. This usually happens in 2 weeks. If they are still in place after two weeks, you may gently remove them.
- Resume activities slowly as tolerated. You may exercise the upper body after 1 week. Walking is fine and encouraged but no lower body work-outs for 6 weeks. Discuss with your surgeon for specific instructions regarding exercise during your recovery.
- Some bruising and swelling is normal.
- In order to further reduce visibility of scar/aid in healing process, you may start using a scar gel about 3 weeks post-operatively. We highly recommend a silicone base scar gel (such as Silagen), that is massaged onto the incisions. This is available for purchase in the clinic.
- Dissolvable sutures are used, and it takes approximately 3 months for them to dissolve. You may see them try to poke out of your incision. They may become irritated; however, this is normal. You should call us to have them removed.
- It is expected to take between 3-6 months to see your final results. It will take about 1 year for the scars to mature.

CALL THE OFFICE IF YOU DEVELOP ANY OF THE FOLLOWING EMERGENT ISSUES:

- Fever of 101 degrees or greater
- Pain not relieved with pain medication
- Swelling, redness, bleeding, and or/foul smelling drainage from an incision site
- **Significant** asymmetrical swelling, drainage, or pain in a bilateral procedure
- Bleeding that does not respond to uninterrupted direct pressure for at least 20 minutes
- Problems with drains that are not solved using the troubleshooting instructions that are provided
- Persistent nausea and/or vomiting

***General medical questions** can be addressed during regular business hours M-F 8:30am-5pm (585-244-1000).

EMERGENT surgical issues can be addressed on evenings or weekends via our on-call EMERGENCY Line (585-258-4851).

The Patient Consultant will make your postoperative appointments.

If I have any questions with regards to the content of the videos and/or my expectations with respect to my participation in my pre-operative preparation, I will review all questions and any concerns with the Advanced Practice Provider during my in-person, pre-operative appointment.

Patient Signature: _____ Date: _____