

POST SURGERY CARE INSTRUCTIONS: Gynecomastia

*These instructions apply to most individuals. We may modify our recommendations to you, depending on your specific needs. Please follow these instructions UNLESS we notify you in writing to do something different. *

LYMPHATIC MASSAGE

For the best results, lymphatic massage is recommended for all liposuction patients. These can be performed with drains in. After liposuction, the lymphatic system becomes overwhelmed resulting in increased swelling and discomfort. Manual lymphatic massage gently "wakes up" the lymph nodes, resulting in decreased swelling and faster healing. You should start lymphatic massage 2-3 days post-op and schedule a minimum of 6 sessions. You may have 1-2 lymphatic massage sessions per week. We have handouts for local companies we trust and recommend in your black folder.

WHAT TO EXPECT AFTER SURGERY

Drainage:

- · Expect a lot of blood-stained drainage for the first 3-5 days from the liposuction incisions.
- · It is not possible to keep bandages on these sites dry for long. 4 x 4 gauze can be used to cover these areas.
- · Rest on Chux or puppy pads to avoid soiling your car, couch and bed.

Skin Discoloration:

- · Bruising is expected in and typically resolves over 3-4 weeks.
- · Skin may be slightly more pinkish in appearance after surgery. This usually improves over the first few days to weeks. Increasing redness associated with skin feeling more warm to touch in that area could represent infection. Please call the office immediately if you encounter this.
- · Skin turning progressively more red or purple around the incision sight, this may be a sign of inadequate blood flow.

 PLEASE CALL THE OFFICE IMMEDIATELY IF YOU ENCOUNTER THIS.

Swelling:

- · Swelling is expected and usually worsens over the first 3 days.
- · Most of the swelling will resolve over the first 6 weeks. You will likely see noticeable swelling that fluctuates throughout the day for at least 6-8 months.
- · Swelling of pubic area (scrotum) is very normal and improves over several weeks.

Tightness and stiffness in the core and lower back:

- · These are normal experiences as the skin, muscles and tissue have been pulled and tightened.
- The tightness and pressure from surgery may make it feel more difficult to breathe. This typically resolves over the first 1-2 weeks as the skin and muscles relax. Using your incentive spirometer as directed will improve breathing. Severe shortness of breath or difficulty breathing is NOT normal. You should seek emergency medical attention if this occurs.
- · One side may be slightly more sore than the opposite side. This is normal.
- · Pain medication and muscle relaxants will help relieve discomfort, but you will not be completely free of discomfort.

Tingling, burning or intermittent shooting pain:

- These are normal experiences as the sensory nerves heal.
- · Pain medication and muscle relaxants will help you cope with any discomfort.

Hypersensitivity or lack of sensitivity:

- This is normal and will gradually resolve over time.
- ·It is expected that you will have numbness in your abdomen that may take 1-2 years to maximally improve.

· It is expected that you will have numbness in your liposuction treatment areas that may take 6-12 months to maximally improve.

Shiny skin or any itchy feeling:

- · Swelling can cause the skin to appear shiny and feel itchy. Avoid scratching—this can cause skin breakdown.
- · Apply Benadryl cream or gel according to package instructions- but never on or near incisions.
- · Oral Benadryl can also help to alleviate severe, constant itchiness. 25 mg every 4-6 hours works for mild to moderate itching. 50 mg can be taken for severe itching, but caution is advised due to sedation.
- · Avoid taking Benadryl within 1-2 hours of pain medicine, muscle relaxers and other sedating medications to avoid potentially dangerous over-sedation.

Asymmetry (one side looks different than the other):

- · Your body was not perfectly symmetrical before surgery. It is not possible for surgery to make your body symmetrical. One side will be slightly different than the other. THIS IS NORMAL & EXPECTED.
- · Significant asymmetry with significantly more pain on the larger side can be a sign of hematoma (bleeding under skin). If you suspect this, please contact our office immediately.

Drainage:

· You will notice bloody-appearing drainage emanating from around the drain tubes. This is normal and expected. The border dressing bandages are intended to collect this.

SAFETY / CAREGIVER

After surgery, you will be weak and drowsy. You will need a responsible ADULT caregiver to stay with you 24-48 hours after surgery to monitor your health and support you.

MEDICATION SAFETY

Dr. Camp uses a multimodal pain medication regimen to help keep pain tolerable and our patients comfortable. Stay ahead of the pain for the first 24 hours by following the schedule of medications outlined on your medication chart. After 48 hours, Dr Camp recommends avoiding the use of narcotics like hydrocodone (norco) and muscle relaxers such as valium. Continue taking Celecoxib (Celebrex) and Gabapentin every 12hours to maintain comfort. **Constant, severe, worsening pain should be reported to our office immediately.**

It is important to take the medications as prescribed. DO NOT drive while taking narcotics, muscle relaxers or any medication that causes drowsiness. Additionally, DO NOT drink alcohol while still taking any of the prescription medications.

POSITION AND ACTIVITY

<u>BODY POSITION:</u> Do not lay flat for 3 weeks. You will rest and sleep on your back for 3 weeks, keeping your head elevated about 30-45 degrees. Wedge pillows, recliners or adjustable beds are ideal for keeping your body in this position.

<u>SLEEP POSITION:</u> Do not sleep on your side or stomach for 6 weeks.

REST: Rest is important in the early stages of healing. Take care of no one else and let others tend to you.

<u>WALK:</u> It is also important that you are ambulatory, meaning that you are walking under your own strength. During the day, spend 10 minutes every hour engaged in light walking indoors as you recover.

ACTIVITY: Do not engage in any stressful activities.

WEEKS 1 - 3

- · For the first 3 weeks post-op, walk as much as you would like indoors
- · Avoid raising your heart rate over 100 or increasing your blood pressure
- No sweating

WEEKS 3 - 6

- · You may ease back into light daily activities and hygiene as you normally would. Listen to your body and avoid stretching or motions that cause too much pain. Your normal range of motion will return as you heal.
- · You may increase activity with faster walking
- · No "exercise" or high impact activity (biking, elliptical, weights or resistance training)
- · Avoid vigorous household activities like vacuuming, house cleaning, etc.
- · Do not lift, push, or pull anything greater than 10lbs.

After 6 WEEKS

- Expect your energy to return to normal 6-8 weeks after surgery.
- Ease back into physical activity, starting very light and increasing frequency and intensity gradually over 3-6 months, depending on your health, physical stamina and pre-operative level of fitness.
- · There is no weight limit, per se, but listen to your body. Discomfort is your body telling you to back off.

SUN EXPOSURE: Avoid sun exposure for 6 weeks. Treated areas are more likely to sunburn for up to 1 year.

DEEP BREATHING

After surgery it may be uncomfortable to take deep breaths. Using your incentive spirometer (blue breathing device) will help strengthen and clear your lungs, reducing the risk of postoperative pneumonia. **Use your incentive spirometer 10 times an hour while awake for 1 week after surgery.**

NUTRITION

Adequate fluid and nutritional intake are CRITICAL for proper healing. You may not feel hungry after surgery. Start with a liquid diet and then progress to a soft foods diet. It is essential that you spread your required fluid and nutritional intake evenly throughout the day. Protein intake is EXTREMELY important for wound healing. We recommend 70-90gms of protein daily after surgery. Protein shakes, smoothies, and soups are great sources of protein and easy to take in after surgery. Limit carbonated beverages and spicy foods that can cause gas and bloating. Limit salt intake- a high salt meal can lead to increased swelling and prolonged recovery. Limit caffeine as it promotes dehydration.

GARMENT

- · You will wake up from surgery wearing the EXACT garment that Dr. Camp wants you to wear until your post-op appointment. You will likely have a vest or long-sleeved compression garment with lipo foam underneath. Wear your garment 24/7, removing only to shower beginning 48 hours post-op. We may change your garment at your post-op appointment. IF YOU HAVE GARMENT ISSUES AFTER HOURS, PLEASE LEAVE IT OFF AND CALL US THE NEXT BUSINESS DAY AT 9AM.
- · Lipo foam (Topifoam is a brand name) is foam sheeting that protects the skin to keep it smooth and prevent contour irregularities. It is typically worn the first 3 weeks. It gets soiled quickly and is difficult to clean. We recommend purchasing extra before surgery so you can change it as needed at home. There are several lipo foam options on Amazon.com-ContourMD is a good brand.
- GARMENTS SHOULD ONLY BE SNUG ENOUGH TO KEEP THE LIPO FOAM IN PLACE (IF USED) AND PROVIDE MILD COMPRESSION IN THE FIRST 3 WEEKS. Excessively tight garments can cause skin damage or contour irregularities in the early post-op period.
- Be sure the edges of the compression garment are not rubbing the skin.
- The compression garment may tend to slide up too high or bunch up, forming folds. It must be checked and adjusted frequently to ensure it is in position, not creating folds and not rubbing your breasts (if you are female).

SHOWERING AND HYGIENE

You may shower **48 hours after surgery**. Have someone help you in case you become lightheaded. We recommend taking the prescribed nausea medication 30 minutes before your first shower. This is also a good time to wash your garment if desired, following the instructions on the tag.

- · To shower:
 - 1. Remove garment and any Lipo foam or gauze.
 - 2. If you have drains, use a lancet or tie a clean shoelace around your neck and attach the bulb drain clips to it. This will keep your drains out of the way while you shower.
 - 3. Take a warm, not hot shower.
 - 4. Do not take a bath or swim.
 - 5. Wash face and hair as you normally would.
 - 6. Wash from the neck down using the Hibiclens soap provided for the first week after surgery. If the Hibiclens irritates your skin, you may switch to Dial soap.
 - 7. Gently wash over and around the incision sites. Do not avoid incisions—apply Hibiclens with your fingers with gentle circular motion around the areas and rinse.
 - 8. Gently pat skin and steri-strips dry with a clean towel.

- 9. Do NOT apply lotion, powder or creams to your incisions or surgical area unless directed by our office.10. Replace dressings with clean gauze or ABD dressings.
- 11. 11. Reapply the Lipo Foam in the same place it was removed from and put your garment back on. You will need help with this!
- 12. Put Garment back on this may be tricky so have help!
- · Change towels/ sheets often first few weeks of recovery.
- · NO baths, swimming or submerging in pools, hot tubs, oceans, lakes until after 6 weeks and when all incisions have completely healed (no open areas).

CLOTHING

We recommend only loose-fitting clothing for the first 6 weeks post-op. If you have liposuction in the core area, please refrain from wearing anything that is constricting at the waist - this can cause permanent indentions in your results. PLEASE MAKE SURE ALL OF YOUR PANTS, SHORTS AND UNDERGARMENTS ARE 1-2 SIZES LARGER THAN WHAT YOU WOULD NORMALLY WEAR.

DRAINS

- · You may or may not have drains, which typically stay in for 2-3 weeks.
- · The purpose of a drain is to get fluid out so it doesn't accumulate in the body better out than in!
- · Upon discharge you will receive instructions on emptying drains and caring for them. GLOVES MUST BE WORN BY PATIENT AND CARETAKER WHEN EMPTYING DRAINS.
- · Remember to write totals of drainage amounts on your drain log. You will bring the drain logs to your post-op appointment. The amount of drainage determines when the drains come out!

INCISIONS AND SUTURES

- · Your incisions may seep fluid and some blood for a short time after surgery. You may have gauze pads over your incision when you remove your compression garment. You may need to cover incisions with 4x4 gauze for the first day or two to absorb fluid and keep the skin dry.
- · Your sutures will be removed in office around 7-10 days post-op
- · Once your incisions have healed, our nurse will direct you on using medical grade scar cream to help your surgical scars fade. The scar cream will be provided for you.
- · Apply the scar cream twice daily. Continue scar cream and massage until the cream runs out.
- · NEVER apply scar cream to open incisions or areas or infection may result.

CONSTIPATION PROTOCOL

You may not have a bowel movement for several days after surgery, this is normal. Constipation can be prevented by staying hydrated, moving, and taking MiraLAX 4x/day in a liquid of your choice. MiraLAX does not cause cramping and is very safe/effective. Diarrhea can be caused by antibiotics taken postoperatively- please notify us if you experience this.

URINATION

We want you to urinate within 4 hours of surgery. Ideally, you should urinate at least twice before you go to bed the evening of surgery. If you are not able to urinate, please notify us ASAP.

NURSE PHONECALL

Your post-op nurse will call you the day after your surgery. Please answer so we can make sure you are healing normally and answer any questions you may have that are not covered in the post-op instructions. We want to speak to you. We are also happy to speak with your caregiver, but we want to hear your voice and have you answer our post-op questions. Please write down all your questions and save your questions for this call. Our RNs have scheduled time to check on our immediate post-op patients.

QUESTIONS AFTER SURGERY

Steven Camp MD Plastic Surgery

Phone: (817) 228-4315

Text: (817) 646-6991

Office Hours: Monday - Friday, 9 am - 5 pm

For post-op questions, please call or text the office and leave a message for our post-op nurse. Please note there may be delays in getting back to you with non-urgent questions as our RNs are in clinic treating patients during the week. Social media should NOT Be used to contact us regarding your care. *Prior to calling, please review your post-op instructions to ensure your question is not already answered.*

EMERGENCIES & AFTER-HOURS

IF YOU GO TO THE HOSPITAL OR URGENT CARE, PLEASE CALL (817) 646-6991 TO LET US KNOW.

NONURGENT: For nonurgent and routine post-op questions after business hours, please <u>TEXT OR CALL THE OFFICE AND LEAVE A VOICEMAIL.</u> We will contact you within 24 hours regarding non-urgent matters. For questions or concerns requiring a more immediate response, call our office to be connected to our after-hours emergency line.

NONURGENT issues include:

- · Medication refill requests
- · Routine post-op questions
- · Appointment scheduling

URGENT: For urgent, non-life-threatening medical issues or concerns, please <u>CALL OUR OFFICE IMMEDIATELY</u> to be connected to our after-hours emergency line. The after-hours emergency line rings directly to Dr. Steven Camp and Sara Camp AG-ACNP, APRN, MSN. If they do not answer, please leave a detailed voice message. They are most likely on another call and will contact you immediately.

URGENT issues include:

- · Surgical drain issues
- · Fever of 101 or greater
- · Allergic reaction to medications
- · Increasing swelling or redness around the incision
- · Drainage from incision that is yellow or green
- · Drainage from incision that has a foul odor
- · Severe pain that is not relieved by medications
- · Severe nausea or vomiting that is not relieved by medications

EMERGENCY: If you are experiencing a life-threatening emergency, <u>CALL 911 OR GO TO THE NEAREST EMERGENCY ROOM</u> IMMEDIATELY. While we cannot provide immediate assistance, we ask that you update us once you are safe.

EMERGENT issues include:

- · Shortness of breath or difficulty breathing
- · Chest pain
- Loss of consciousness
- \cdot Calf pain or tenderness, lower leg/calf swelling, one leg more swollen than the other \cdot Uncontrolled bleeding

COMMON QUESTIONS

Jewelry/Piercings: If you have piercings, you can have non-metal spacers placed before you arrive to the surgery center, as long as the piercing area is a NON-SURGICAL area. Otherwise, not even a spacer is allowed. Please don't call us and ask about this as there are no exceptions. It's for your protection and keeps the tools used in surgery from burning your skin!

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Menstrual Cycle: What if I'm on my period the day of surgery? This will NOT hinder you from having surgery. Please wear a pad (not

a tampon) to surgery. You will be provided with pads and disposable underwear at the surgery center.

Exercise: See 'Activity Section' for details. Doing so earlier can mess up your results and prolong healing.

SEX: Refrain from sex for at least 4-6 weeks after surgery. Resume with caution and avoid pressure or rubbing on surgical sites.

Swimming/Baths: AVOID for at least 6 weeks after surgery. All your incisions must be COMPLETELY healed and closed before you do this. Otherwise, you could get a bad infection! This includes lakes, oceans, hot tub, pool, and bath water.

Scar Treatments: A few weeks after your procedure and when incisions completely closed, our nurse will direct you to start using Silicone Scar Strips or silicone scar gel- apply with clean hands. Scar Away is a good over the counter brand. You can get these products at CVS, Walgreens, Wal-Mart, or on Amazon. You may start applying scar strips for 12 hrs. on, then 12 hrs. off every day. Scar gel may be applied every 12 hours. Continue using for several months after surgery.

Post-Operative Travel: Typically, we recommend not traveling for at least 6 weeks for vacations! Necessary travel before this time should be done cautiously, taking care to adhere to lifting and activity restrictions to avoid complications. This is the timeframe in which you have the highest risk of getting an infection or an incision opening up.

Alcohol: Avoid for 2 weeks before surgery and at least 2 weeks after surgery. You must be off all of your medications for at least ONE full week before you drink alcohol. Alcohol is NOT good for healing!

Smoking: No smoking or second-hand exposure to smoke for AT LEAST 6 weeks after surgery.

Tanning: Avoid excessive sun exposure 10 days prior to surgery. If you have a sunburn, surgery may have to be delayed. Avoid direct sun exposure of surgical site skin for at least 6 weeks after surgery. Sunblock with UVA/ UVB protection SPF 35 or greater is recommended to protect skin with any sun exposure. Note: bathing suits and thin clothing offers minimal sun protection. You should always apply sunblock under such garments.

Spray Tan: Avoid for 2 weeks prior to surgery and for 6 weeks after surgery.

Tattoos: Avoid for 6 weeks before surgery and 3 months after surgery to decrease the risk of infection.

Pets: No pets sleeping in your bed for 6 weeks. Do not walk large dogs with a leash for 6 weeks after surgery.

Nails: Do not replace dip, gel, or acrylic nails until cleared by your nurse.

Should I search online or ask my friends if I have any questions about my procedure or recovery? You know the answer to this one! Google "experts," reading social media "expert groups" or asking your friend that had plastic surgery causes a lot of problems and unnecessary anxiety. Please call us if you have any questions or concerns. Dr. Camp is a board-certified plastic surgeon with nearly 10 years in private practice. It is dangerous to attempt to diagnose yourself or depend on the advice of bloggers, social media sites or friends and family. We are here to help, ask us anything!