

BODY CONTOURING POSTOPERATIVE INSTRUCTIONS

The evening of the surgery: Undisturbed rest is the most important thing the first night. Try to group nursing activities together (empty the drain when you are awake taking medication, going to the bathroom, etc.). If you are asleep, you do not need to be awakened for medications.

Avoiding nausea: Always eat something before taking pain medications or antibiotics. Keep foods light the day of the surgery, avoiding heavy or greasy foods. Suggestions include soups, crackers, toast, yogurt, milk shakes, cereal, oatmeal, mashed potatoes, and scrambled eggs.

Antibiotics: The first dose will have been given during surgery. Take your first pill tonight (about six hours after you leave the office). The antibiotic should be given approximately every six hours until they are gone (two days).

Abdominal drain: Your abdominal drain is attached to a small bulb used to collect bloody drainage from your surgery sites. The drain is sutured to the skin at the entrance site. If you pull on the drain inadvertently, it will not come out. It will, however, hurt. It removes drainage with a gentle suction action when the bulb is squeezed to a concave shape. The bulb should be emptied whenever it is full enough to interfere with the vacuum action. You can shower with the drain in place. Be sure to hold the drain so it doesn't pull on the suture.

To empty: First, pinch off tubing (like kinking a garden hose). Then open the cap, keeping the tubing kinked and empty into the small cup we have provided. Next, squeeze the bulb into a concave shape, and replace the cap on the bulb. Release the kink in tubing. Measure the amount emptied and record amount and time. Dr. Terranova will remove the drain on your first postoperative visit (usually 5-6 days following the surgery) if the drainage amounts are appropriately low.

The day following surgery: The most important thing this day is getting up and walking around. Remember that our greatest worry, in terms of complications, is blood clots in the leg. **The best prevention for this is walking around!** Going to the bathroom is not enough. Our rule of thumb is to walk around the house, or even the backyard, for 5-10 minutes every two hours while you are awake. After a few days when you have begun to resume normal activities, this will no longer be an issue.

Showering: The first shower can be taken on the second day following surgery. Not only will it make you feel better, but it will also allow you to be more active and get back into a more normal routine. Simply remove the dressing from the incision. You may shower over the incisions and even over the drain. Remember that the drain is sutured to the skin so that it cannot be pulled out by mistake so you will need to hold it in one hand. Given that and given the expected post-operative weakness and possible dizziness, another person will need to assist for this first shower. A bench or plastic chair in the shower will make it more comfortable since you are not likely to be able to stand up for very long at this time.

Wound care: After shower, use a Q-tip to gently clean the belly button. Then apply a small amount of antibiotic ointment (Bacitracin, Neosporin, etc.) to the belly button incision and to the drain as it enters the skin. The main incisions can be, and are best, left dry. No specific dressings are required unless there is continued drainage, in which case a maxi pad or gauze pad can be applied. Either the mesh panties that we have supplied or a pair of old loose fitting cotton panties can be used. Try to avoid pants. An old house dress or something similar is best, as there will be no constriction around the waistline, which could prove dangerous to the blood supply of the abdominal skin below the belly button.

Medications: After about three or four days, begin the process of weaning off of narcotics during the daytime. Substitute either Tylenol or Motrin (an appropriate dose for this level of pain is 800 milligrams). At this time, you should probably continue taking nighttime narcotics to help you sleep. After 10-14 days, you can begin the process of weaning from nighttime narcotics as well. Depending upon the degree of muscle spasm that is present, some individuals find that the Flexeril can be just as helpful as the narcotics in terms of pain relief, especially at night. Keep in mind that Flexeril can make some people very drowsy. This is a good idea at night (and some people use it for a couple of weeks for that purpose), but it is not a good idea during the daytime particularly if you are going to be driving.

Constipation: Constipation is a very common problem with patients who have had body contouring surgery. It is also, as you may imagine, extremely uncomfortable. If you have not had a bowel movement by the third day following surgery, go to the drugstore and buy a couple of Dulcolax® suppositories. Do not get pills, as they do not help. The suppository usually works in a couple of hours, so do not take it before you go to bed. If one does not work, take a second. If there is still no result, refer to the special instructions that we have included regarding constipation.

Follow-up appointment: Call the office Monday and an appointment for either Tuesday or Wednesday will be made for you.

If you have any questions or concerns, call the office at 843-797-0440 or the answering service after-hours at 843-724-5441.

RELEASE FOR POSTOPERATIVE HOMECARE INSTRUCTIONS

I, _____, have been given and understand the postoperative home care instructions regarding patient, _____.

CAREGIVER SIGNATURE: _____

WITNESS: _____