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## Post op Instructions - Breast Lift / Breast Reduction

<u>Dressing:</u> You will have a surgical dressing at the end of procedure and before you are transferred to recovery. Dr. Abolmaali usually uses butterfly tapes (Steri-strips) which cover the entire length of incisions and around the nipple. They should be left alone for one to two weeks. If instructed, you can shower by allowing soap and water running over the tape. The surgical site can be dried by blotting with dry towel.

<u>Sutures:</u> The sutures will dissolve in a few weeks and normally there is no need for suture removal after the surgery. Occasionally, the ends of sutures need to be trimmed during the post op visits. This will not normally cause any pain or discomfort.

<u>Surgical site care:</u> Normally you can shower 48 hours after the surgery, unless you have drains in place. You may allow soap and water to run over the surgical sites in the shower without rubbing anything against the incision sites. DO NOT take baths for at least 2 weeks (only showers). After shower, you may either air dry the area or blot it using a clean towel.

<u>Activities:</u> We recommend you rest for the first 3-5 days after surgery with your head and chest slightly elevated by using 2-3 pillows. Afterwards, you may increase activities with no lifting, bending down or exercise for at least two weeks. No bouncing activities for 6 weeks, i.e. jogging. Avoid driving while still taking pain medications.

<u>Surgical Bra support:</u> Wear you support bra until instructed otherwise. Once instructed, you may begin wearing a sports bra or bra without underwires. We recommend you not to wear bra with underwires for up to six months. It is important to keep the surgical bra clean by washing it on regular basis.

<u>What to expect:</u> Swelling, bruising and some bloody drainage is normal. You may experience hypersensitivity in the nipple area or more commonly lack of sensation. As numbness subsides, it is common to feel itching, tingling or sharp sensations. These sensations will eventually go away; however, it may take months to resolve.

<u>Drain care:</u> Although not common, sometimes a drain is used to remove the fluids from the surgical site. If drains are used, you will be instructed before the surgery on how to manage them. Normally, you need to empty the drain bulbs twice daily and chart the output on a diary to keep track of how much they are putting out. It is very important to bring the diary with you

on your post-operative visits. Antibiotics must be taken as long as drains are in, so call if you run out.

## **How to empty the drain:**

- 1. Wash your hands well with soap and water.
- 2. Pull the plug out of the bulb.
- 3. Pour the fluid inside the bulb into a measuring cup.
- 4. Clean the plug with alcohol. Then squeeze the bulb flat. While the bulb is flat, put the plug back into the bulb. The bulb should stay flat after it is plugged so that the vacuum suction can restart. If you can't squeeze the bulb flat and plug it at the same time, use a hard, flat surface (such as a table) to help you press the bulb flat while you re-plug it.
- 5. Measure how much fluid you collect-ed. Write the amount of drainage, and the date and time you collected it, on the JP drainage chart at the end of this document.
- 6. Flush the fluid down the toilet.
- 7. Wash your hands.

Signs to watch for: Call the office immediately if you experience any of the following:

- A high fever (over 101F)
- Severe nausea/vomiting, continued dizziness or incoherent behavior, such as hallucinations.
- Excessive bleeding or fluid seeping through the incisions.
- Severely swollen or enlargement of one breasts associated with pain and/or bruising

<u>Signs of hematoma:</u> Painful extreme swelling, and hardness often accompanied by bruising, usually only on one side causing asymmetry. Please notify us if you have any symptoms you are concerned with immediately.

<u>Scar management:</u> Normally Dr. Abolmaali will use Steri-strips for 2-3 weeks post operatively. After they are removed, you will be instructed on how to minimize further scarring by massaging the area and applying Silicone products such as scarguard, NewGel, Silagen, Biocorneum and/or silicone sheets.

Obviously, patient care is very individualized, and you will be instructed by Dr. Abolmaali before the surgery and/or during postoperative follow-ups of more individualized instructions.

If you have any questions/ concerns, please contact Dr. Abolmaali on his cell phone +1 (502) 265-6225; Alternatively, you may text this number.