



COSMETIC SURGERY
OF LAS VEGAS

DR SAMIR PANCHOLI

Facial Enhancement - Post Surgery Care

Face lift, Neck Lift, Mid-face Lift, Forehead and Brow Lift

Shopping: Obtain these items before surgery.

- Prescriptions
- Supplies:
 - Ice pack or Frozen peas and Ziploc bags.
 - Q-Tips
 - Hydrogen Peroxide
 - Antibiotic Ointment
 - A New Soft Bristle Toothbrush
- Food – Day 1: Simple, easy to digest foods (toast, crackers, Ensure or Boost, pudding, soup, etc.)
Week 1 and 2: Soft diet.
Week 3 and forward: Slowly progress to a normal diet.

Dressings/Bandages:

- Your head wrap will be removed the next day during your appointment.
- Starting the day after surgery
 - Face or Neck Lift Patients: Wear your neck support strap after surgery as follows:
 - First week - 24 hours a day
 - Second week - At least 12 hours a day
 - Third and Fourth weeks - At night
 - You may remove your neck support strap when you take a shower.
- You may shower daily starting 24 hours after surgery.
 - Do not bathe.
 - The surgical tape / foam may get wet, but avoid soaking the tape / foam in water.
 - Towel dry the surgical tape / foam first and then use a hairdryer on a cool air setting to complete the drying process. Do not use the warm or heated hairdryer settings

Sutures:

- Your sutures are dissolvable
- Any staples in hair bearing areas (if applicable) will be removed at your one-week appointment.

Wound Care:

- Starting the first day after surgery, clean your incisions as follows:
 - Keep your surgical tape / foam in place.
 - Wash your hair gently everyday.
 - After your shower
 - Gently dab all incisions using a Q-tip soaked in diluted hydrogen peroxide (mixed with 50% water).
 - Then apply a thin layer of antibiotic ointment to **all** incisions.
 - Dry the surgical tape / foam as described above using a hairdryer on a cool air setting.
- Mid Face Lift patients with oral incisions – Perform the following three times a day:
 - Carefully brush your teeth
 - Rinse with warm salty water.

COSMETIC SURGERY OF LAS VEGAS

Patient: _____

Date: 8/17/2010

Activity:

- Up to 6 weeks:
 - Limit neck turning
 - Avoid rapidly turning your head
- Up to 3 weeks:
 - Do nothing that raises your heart rate or blood pressure including but not limited to:
 - Lifting
 - Exercise
- Up to 2 weeks:
 - Avoid heavy exercise or lifting
- Up to 1 week:
 - Avoid driving while still taking prescription pain medication
 - Sleep on your back and avoid lying directly on the side of your face.
 - Sleep with your head elevated 30 to 45 degrees with several pillows to help decrease swelling.
 - Maintain a soft diet and avoid heavy chewing and prolonged talking
- Up to 24 – 48 hours:
 - Apply ice pack / cold pack / Frozen peas in Ziploc bags to your face (do not apply directly to skin)
 - Avoid all nicotine products (including second hand smoke) for at least 4 weeks.
 - Avoid drinking alcoholic beverages to minimize bleeding.
 - Do not lift anything over 10 pounds.

Special Instructions:

- Swelling, bruising, and some bloody drainage are normal for the first 2 weeks.
- Be aware of a possible hematoma by noticing:
 - Usually one side of your face begins to experience:
 - Extreme swelling
 - Extreme hardness
 - Extreme pain
 - Notify Dr. Pancholi immediately if the above occurs.
- If Drains were used:
 - They will be left in place until drainage is less than 30 cc over a 24-hour period.
 - Antibiotics must be taken as long as drains are in place. If you run out, call us for a refill.
- Numbness, tingling, or sharp sensations is expected for the first few months.
- Do not drive any vehicles or operate any heavy machinery:
 - 36 hours following your surgery.
 - 4 hours following your last dose of pain medication.
 - 8 hours following your last dose of sleep medication.
- Prescriptions:
 - If you have a sensitive stomach, take your antibiotic with yogurt.
 - If your pain medicine is making you sick:
 - Lower the dose.
 - Take it with food.
 - Notify Dr. Pancholi.

Patient

Signature: _____

Date: _____

Address: _____

Phone: _____

Guardian

Signature: _____

Relation

to Patient

Date: _____

Dr. Pancholi

Date: _____

Witness

Date: _____