

BLEPHAROPLASTY POST-OP INSTRUCTION

ACTIVITIES

- No strenuous activity. No heavy bending, lifting, twisting, pushing, or pulling >5-10 lbs. for 6 weeks.
- Driving may be resumed when you are no longer taking pain medications and can drive easily and rapidly, moving your foot from the gas to the brake. For the majority of patients, this window is usually one week.
- Do not smoke or be around a smoker. This can be the most significant cause of serious healing issues.
- Sleep with your head elevated 45 degrees for several days to minimize swelling. Sleeping on your back the first two weeks after surgery promote minimal swelling.
- Wait seven days after surgery to begin using contacts again. You can wear your glasses one day after surgery.
- Wait two weeks before tweezing, waxing, or threading eyebrows.
- Avoid hair coloring for four weeks after surgery.
- Eye shadow, eyeliner, or false eyelashes should not be applied for two weeks after surgery.
- Avoid wearing make-up for two weeks or until your provider says this is okay.
- **Listen to your body. If it hurts do not do it!**

DIET

- Fluid intake is encouraged. It is important to make sure you are well-hydrated. Drink at least eight 8 oz. glasses of water daily after surgery.
- Follow a balanced diet. Avoid heavy, greasy, or spicy food.
- No alcoholic beverages while taking pain medication. Even after pain medications are done, it is encouraged to avoid drinking alcohol for 3 weeks as it causes fluid retention.
- Constipation after surgery is common from general anesthesia as well as narcotic pain medicine. An over-the-counter stool softener is recommended. Milk of Magnesia, Mag Citrate, or enemas can be used to help or even adding raw fruit to your diet can aid in constipation relief. Remember to increase your fluids as well.

WOUND CARE

- Sutures are normally removed within one week of surgery.
- Keep the dressing clean and dry for 48 hours; do not remove the dressing on your own. You will have steri-strips and sutures on your lids post-op. Please **do not** cut the blue suture or remove the white steri-strips.
- After surgery you may shower in 48 hours. It is okay to shower once a day and this is encouraged for hygiene.
- Apply ice packs for 48 hours or longer as this can help with pain and swelling for the entire post-operative period. (20-minute ice packs on and 20 minutes off).
- You can clean suture lines three times a day with hydrogen peroxide on a Q-tip.
- Your eyes will be sensitive to sunlight, wind, and other irritants for several weeks. Wear sunglasses and a special sunblock made for the eyelids.

WHAT TO EXPECT

Swelling

- Swelling will vary both patient-to-patient as well as side-to-side. Swelling may actually increase the first three to four days before subsiding. Most of your swelling should resolve over the first two to three weeks. Do expect, however, to have minor fluctuations in the remaining swelling over the course of the next two to three months. Things to do to minimize this swelling include keeping your head elevated as much as possible over the first two to three weeks, avoiding bending over or heavy lifting for the first three weeks, and avoiding prolonged sun exposure for the first two to three months.

Discoloration

- Bruising will vary like swelling from person to person as well as side-to-side. Most bruising and discoloration should resolve over the first two weeks.

Dry Eyes

- This can occasionally occur, especially for those patients with low tear production to begin with. With dry eyes, your eyes will feel as if you have sand in them. They may look bloodshot or develop a yellowish swelling or film. Although annoying and uncomfortable, this is a temporary condition.

MEDICATIONS

- **You can pick up saline eye drops (artificial tears) before your operation. Apply these 2 drops in each eye every 6 hours.**
- **Artificial tear ointment (Lacrilube) can also be purchased to apply nightly.**
- Resume all home medications as directed by your primary care provider, and follow up with them if you have any questions about resuming the medication.
- The medications you will be prescribed after surgery are part of our Enhanced Recovery After Surgery (ERAS) program. This program is designed to make your recovery faster and easier on you and your body and to lower the chances of a problem after surgery.
- Acetaminophen (Tylenol) 1000 mg by mouth three times daily (OVER-THE-COUNTER).
You should take your Tylenol on a regular basis for the first two weeks after surgery. Tylenol is an excellent pain reliever that is non-addictive and has few side effects.
- Naproxen (Aleve) **OR** Ibuprofen (Advil) 800mg tablet by mouth twice daily (OVER-THE-COUNTER)
You should take it on a regular basis for the first two weeks after surgery. Aleve/Advil is a pain reliever **AND** anti-inflammatory. This medication works differently than Tylenol. Do not take this medication if you have had gastric bypass surgery, have a history of kidney problems, or have been told not to take this medication by another doctor.
- Oxycodone (Roxicodone) one to two tablet(s) by mouth every 6 hours as needed after surgery (Prescription)
Oxycodone is a narcotic pain medication. Most patients will feel nauseated and may vomit if this medication is taken on an empty stomach. This medication also causes constipation that worsens over time. Taking the prescribed stool softener and increasing your water and fiber intake is important to help with constipation. This medication can be addictive for some patients, and it is important to taper off this medication quickly after surgery. Narcotic pain medications should be used for short periods of time only and can be helpful for breakthrough pain after surgery. Once you have stopped taking this medication, turn the rest into your pharmacy so that it can be disposed of correctly. Every prescription of this medication is closely tracked and monitored by the Federal Drug Enforcement Agency (DEA).
- Polyethylene Glycol (Miralax) one capful (17 grams) by mouth twice daily (OVER-THE-COUNTER)
Miralax is a stool softener agent. You should take this medication twice daily after surgery to help with constipation. Constipation after surgery is from the general anesthesia as well as the narcotic pain medication you get during and after surgery. It is important to make sure you are well hydrated while taking this medication, so drink at least eight 8 oz. glasses of water daily after surgery.

CALL THE SURGEON:

- Continuous bleeding that does not stop with pressure
- Fever of more than 101.5 degrees
- Unable to empty bladder
- Difficulty breathing
- Nausea or vomiting not controlled with the anti-nausea medication
- Opening of the incision
- Lidocaine Toxicity

Signs & Symptoms of Lidocaine Toxicity

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| o Slurred or difficult speech | o Dysrhythmias (irregular heartbeat) |
| o Paresthesia- "pins and needles" feeling of skin | o Restlessness, Agitation, Nervousness |
| o Numbness of lips/mouth | o Hypotension (low blood pressure) |
| o Metallic taste in mouth | o Bradycardia (low heart rate) |
| o "Ringing" in Ears | o Loss of Consciousness |
| o Double Vision | o Muscle Twitching |
| o Feeling hot or cold | o Tremors or Shaking |
| o Altered Cardiovascular System | o Seizures |
| o Drowsiness | o Respiratory Depression |
| o Dizziness | o Respiratory and Cardiac Arrest |

RISKS

Just as there may be risks and hazards in continuing my present condition without treatment, there are also risks and hazards related to the performance of the surgical, medical, and/or diagnostic procedures planned for me. I (we) realize that common to surgical, medical, and/or diagnostic procedures is the potential for infection, blood clots in veins and lungs, hemorrhage, allergic reactions, and even death. I (we) also realize that the following risks and hazards may occur in connection with this particular procedure:

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| 1. Worsening or unsatisfactory appearance | 4. Impairment of eyelid function |
| 2. Creation of several additional problems | 5. Increased/decreased tearing |
| a. Poor healing or skin loss | 6. Asymmetry |
| b. Nerve damage | 7. Eyelid malposition |
| c. Painful or unattractive scarring | 8. Blindness |
| d. Impairment of regional organs, such as eye function | 9. Corneal abrasion |
| 3. Recurrence of the original condition | 10. Lidocaine Toxicity |