Rhinoplasty and Nasal Surgery Instruction Sheet

Each year, several million people undergo elective cosmetic surgery. Although serious complications resulting from facial cosmetic surgery are extremely rare, careful planning will help to make your surgery safe and more comfortable. Please read the following document carefully so that you may make preparations for your upcoming surgery. If questions arise, please feel free to contact your surgeon or one of our staff members.

Rhinoplasty can make a big difference in a person’s facial appearance or breathing ability. Surgery however is not without some risks. This information is not meant to scare you, as risks are extremely low. However, it would be remiss not to briefly provide them to you. Risks include, but are not limited to:

- Anesthetic risks (rarely as serious as death)
- Infection
- Septal perforation: a hole may develop in the wall that divides your nose in half if the lining does not heal correctly
- Bleeding, hematoma (blood collection)
- Cosmetic imperfection: minor asymmetry, scarring, surface irregularity.
- Need for revision surgery

Please discuss with your surgeon for more details.

### Quick Reference

**Before surgery:**
- Stop taking aspirin 2-3 weeks before surgery
- If needed, Tylenol (acetaminophen) is the preferred pain medication before surgery.
- Gather needed supplies in advance: cotton swabs, 2x2 gauze pads, tape, nasal saline irrigation (NeilMed, etc), nasal decongestant spray (Afrin®) for minor nasal bleeding, Bacitracin antibiotic ointment.
- Nothing to eat and drink after midnight before surgery

**Immediately following surgery:**
- Irrigate 3-4 times a day (or more) with saline solution to help clear drainage, remove blood clots, and flush nasal passages.
- Expect minor bleeding. May use Afrin to help with bleeding, if excessive.
- You may change the upper mustache dressing as needed. Do not remove, get wet or disturb external splints.
- Crushed ice placed in a baggie should be placed gently over the bridge of the nose and beneath the eyes for the first 48-72 hours after surgery. Elevate head above the level of your heart at all times.
- Antibiotic ointment around the nostrils twice a day with a cotton tip applicator.
- Start with light liquids (broth, soda, crackers, toast, etc) and progress slowly to regular foods.
- Take medications as instructed.

**Before surgery:**

1. Discontinue the following medications 2-3 weeks prior to surgery.
   - Aspirin containing products (e.g. Bufferin®, Excedrin®, Alka Seltzer®, Goody’s Powder®, etc.)
   - Similar analgesic medications such as Motrin®, Alleve®, Advil®, Ibuprofen®, Nuprin®
   - Vitamin E and all herbal supplements (ginko, gensing, garlic, etc.)

   These medications may cause excessive surgical bleeding, which makes surgery more difficult to perform. Likewise, these medications should also be avoided immediately after surgery. Tylenol (acetaminophen) is the only non-prescription analgesic that may be used safely before or after surgery. If in doubt, ask your surgeon about which medications you may take. Notify your physician if you are taking other blood thinners such as warfarin (Coumadin), clopidogrel (Plavix), pentoxifylline (Trental).

2. Get plenty of rest, eat a balanced diet, and avoid excess alcohol ingestion and sun exposure the week prior to surgery.
3. Gather needed supplies in advance. For patients undergoing nasal surgery, the following supplies are recommended. It is also a good idea to stock up on easy to prepare foods for the week following surgery. If you are also undergoing eyelid surgery, remember to bring dark sunglasses on the morning of surgery.

- cotton swabs,
- 2x2 gauze pads and ½” paper tape for “mustache dressing”
- nasal saline irrigation (NeilMed, etc).
- nasal decongestant spray (Afrin®) for minor nasal bleeding
- Bacitracin antibiotic ointment

**Day of surgery:**

1. Do not eat or drink after midnight. Remember not to take any breakfast (including coffee) unless permitted by your surgeon or anesthesiologist.

2. Take only those medications authorized by your surgeon or anesthesiologist. These may be swallowed with a small sip of water.

3. Avoid wearing make-up.

4. Wear comfortable, loose-fitting clothes that button down the front. Avoid wearing clothing in which you must pull over your head. Do not bring nice clothing as stains from ointment, blood, etc. are possible.

5. Leave valuables (jewelry, money, etc.) at home. Bring only essential items.

**Immediately following surgery:**

*Dressings and wound care:* You will awaken from anesthesia with a metal or plastic splint taped to the bridge of your nose. In addition, there may be internal nasal dressings in each nostril. Initially, breathing through the nose is difficult; you can breathe through your mouth. An external drip pad or “mustache dressing” may also be taped to your upper lip to catch any additional drainage. You may change the drip pad as needed, but the remainder of the dressing is not to be disturbed. It is vitally important that you nasal splint remain dry so it does not loosen prematurely.

In general, your nose will hurt very little unless you disturb it, so try to minimize movement or manipulation of the nose. Crushed ice placed in a rubber glove or zip-lock bag should be placed gently over the bridge of the nose and beneath the eyes to minimize swelling or bruising and to alleviate discomfort. A moist paper towel beneath the bag of ice will prevent freeze injury to the skin while transmitting the cold temperature. Use the ice for the first 48-72 hours following surgery. Elevating your head above the level of your heart, especially during sleep, will also serve to minimize discomfort and prevent swelling.

*Nasal wash:* Although it is unsafe to blow your nose, regular use of nasal saline irrigation (3-4 times a day or more) will assist in flushing the nasal passages and prevent crusting. Immediately after using the spray, sniff and swallow, but DO NOT blow your nose for the first week following surgery. Although improved nasal breathing is often the goal of rhinoplasty surgery, swelling and crusting are usually present for 2-3 weeks after surgery and the full benefits of surgery may take several weeks to manifest.

Minor nasal bleeding is expected after surgery. However, if the bleeding is too frequent, start with spraying Afrin into the nostrils. Afrin helps constrict blood vessels, reducing bleeding. If it becomes too troublesome, give us a call.

Place bacitracin antibiotic ointment around the nostrils twice a day with a cotton tip applicator.
Activity: Rest quietly in bed (or in a reclining chair) with your head elevated (above the level of your heart) for the first 48-72 hours. Unnecessary activity will encourage swelling, bruising, discomfort, and delayed healing. Wound complications such as bleeding and increased swelling are more likely when vigorous activity precedes complete healing. It is common to have low energy levels following surgery. Minimize all activities for several days until these symptoms resolve. Avoid exercise and exertion for the first 2 weeks. Do not utilize your recovery period to catch up on errands and house work.

Diet: Avoid eating or drinking if your stomach is unsettled. Oral intake will make nausea much worse and you may safely postpone oral intake for the first 24 hours after surgery. In most cases, a healthy appetite will return within 24-48 hours of anesthesia. You may begin eating when you start to feel hungry. Start with light liquids (broth, soda, crackers, toast, etc) and progress slowly to regular foods.

Eyeglasses: Glasses may be worn comfortably on top of you nasal splint. However, once the splint is removed, eyeglasses cannot be worn for 4 weeks. During this time, you may wear contact lenses or avoid wearing glasses altogether. If glasses are essential, you may suspend them from the forehead with tape to prevent them from resting upon the nose.

Skin care: For the first week after rhinoplasty surgery, it is very important not to disturb the surgical site. Once the splint is removed, you may find a temporary increase in blemishes and comedo (pimple) formation where the tape contacted the nasal skin. These should resolve spontaneously with daily soap and water. Do not use harsh cleansing solutions or acne creams on the skin. Remember that the nose will remain sun-sensitive until all swelling and tenderness resolves, so use sunscreen. The incision frequently placed at the base of the nose may be red initially, but it will fade and disappear in the weeks following surgery. In general, the nose will look substantially better within 10 days of surgery. Also, it is not unusual to have slight bruising around the lower eyelid. These bruises will turn from purple to yellow before fading completely away. You will generally appear presentable for social engagements 1-2 weeks after surgery. However, depending upon your skin type, complete healing may take several more weeks or rarely several months.

Medications: You will be given prescriptions for pain medication and possibly oral antibiotics. Nearly all prescription pain medications have nausea as a side-effect. Consequently, use regular Tylenol® for light discomfort and reserve the prescription medication for more stubborn pain. Begin taking the antibiotic tablets once you are comfortably tolerating oral intake. Complete the entire antibiotic regimen.

You will undoubtedly have questions that arise periodically. Please feel free to contact us at any time.