

Pre and Post-Operative Instructions for Lower Body Lift / Belt Lipectomy

Charleston Plastic Surgery

You have undergone major surgery. For a speedier recovery, please follow these instructions:

- Someone must be with you for the first 24-48 hours following surgery. This is to make sure you are taking our medicine properly, to assist you when walking if needed, and to get in touch with us if needed.
- You may experience a sore throat after surgery. This is common after anesthesia and will clear up in a few days.
- NAUSEA: Mild nausea is common after surgery. If you have moderate to severe nausea, please use Phenergan as directed. If vomiting occurs, use ice chips until clear liquids can be tolerated.
- PAIN: You will be given prescription medications for pain, please take as directed on the bottle. Starting the day after surgery we want you to take Ibuprofen 200mg, 4 times per day if not contraindicated (ie – history of bariatric surgery). You will be taking this in addition to your prescription pain medication to help reduce inflammation and swelling. When you are off the prescription pain medicine during the day, you are welcome to increase the Ibuprofen to reduce inflammation/swelling AND for pain. Please do not exceed 3200mg of Ibuprofen per day. Remember, narcotics may cause constipation, please drink plenty of water. You may use a stool softener if you have not had a bowel movement in 3 days.
- SMOKING: No nicotine is tolerated at least 4 weeks prior to surgery and for at least 8 weeks after surgery. Avoid secondary smoke. Nicotine will constrict blood vessels, leading to poor wound healing.
- DRIVING: Do not drive a car or operate machinery for at least 48 hours after and until you are no longer taking narcotics.
- EXERCISE/ACTIVITY: Please be sure to walk around the house the day after surgery to prevent post-operative complications. Please be sure to have assistance when you first get out of bed. Gradually work up to your normal daily routine. For the first 6 weeks, you should not lift anything greater than 10lbs and walking should be your only form of exercise. Further lifting instructions will be given to you at your first post-operative appointment.
- REST: When you return home from surgery, please try to rest as much as possible for the first 12-24 hours. Sitting is not recommended for the first 7-10 days after surgery, this will put excess strain on the incision and lead to complications. Laying or standing is recommended. You may lay on your stomach or your back, as long as you use a “log roll” technique for position changes. *It is imperative that you begin light walking around the house the day after surgery to prevent post-operative complications.* Please be sure someone is with you when you get up for the first time.
- COMPLICATIONS: Complications, albeit uncommon, may occur following any surgical procedure. These may include (but are not limited to) bleeding, infection, damage to surrounding structures, scarring, tissue necrosis, wounding, fluid accumulation (seroma), residual laxity of the skin, asymmetry, fat necrosis, contour irregularity, changes in skin sensation, DVT/PE or need for future surgery. If you experience a sudden fever of 101 or greater, increased swelling, redness, heat, or profuse bleeding please call our office for advice: 843-722-1985

Specific Instructions:

- You can expect to have two or more drains in place when you wake up from surgery. These are suction drains that are very simple to care for. The drainage bulb must stay compressed. If the bulb is not compressed, the drain is inactive. Drainage must be measured and recorded at least twice daily. Most often, drainage will be the consistency and color of blood for the first 24-48 hours. Drainage may start to decrease but it will start to increase with activity around 48-72 hours. Bloody drainage may start to become clear and can turn red, orange or yellow. This is normal as long as there is a clear tint to the drainage. If there is pus or green drainage, please contact our office.
- You may shower 2 days after surgery. To do so, you may remove your binder and the white gauze pads underneath. Please leave the tape in place over your incisions. If you have a long necklace or lanyard, please pin your drains up to that so they do not dangle in the shower. It is OK to wash your body with soap and water but please keep you back to the water. Pat dry and re-apply your binder. You may want to place fresh gauze over the surgical site if there is some drainage. Alternatively, you may want to wear a soft T shirt under the binder so it is not uncomfortable when rubbing on your skin.
- It is OK to use moisturizer on your skin about 1 week after surgery. We do not recommend utilizing formal scar gels or sheets over the incision line until about 6 weeks after surgery. Any scar gel or sheeting containing silicone is sufficient.
- You will leave surgery in an abdominal binder. You will wear this binder 24/7. You may remove the girdle for showering and to launder. Drains will typically be removed 1-2 weeks after surgery depending on your drainage. Once your drains are removed, you will be placed in a girdle. Additional information will be given at your follow up appointments.
- You will be in a compression garment for a total of 3 months. The first garment, a girdle, will be provided for you.
- You will return to our office about 1 week after surgery. We will offer further instructions at this appointment.