

Blepharoplasty

PREOPERATIVE INSTRUCTIONS FOR OUTPATIENT SURGERY

Have your prescriptions filled.

Do not take Aspirin, anti-inflammatory medications, or vitamins two weeks before or after surgery. You may need to consult your physician about aspirin and any other blood thinning medication. These products cause bleeding and bruising. You may take Tylenol.

If you take any other medication daily, please notify the Doctor.

If you develop any respiratory symptoms (i.e. cold, fever, cough) prior to surgery, please notify the Doctor.

DAY BEFORE SURGERY

1. Do not eat or drink anything after midnight the night before surgery.
2. The night before surgery, shower and shampoo your hair with Technicare soap.

DAY OF SURGERY

1. You may brush your teeth and rinse your month, but do not eat or drink anything.
2. Repeat your Technicare shower.
3. One hour before time to be at the office, take the Ativan tablet.
4. Wear no make-up.
5. Have hair combed simply. Wear no hair pins.
6. Do not bring jewelry or valuables.
7. Prior to surgery, remove contacts or glasses.
8. Wear comfortable clothes that do not have to be put on over your head. Wear flat shoes.
9. Someone must drive you to and from the surgery. Also, someone must stay with you for the first night.

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POSTOPERATIVE INSTRUCTIONS FOR OUTPATIENT SURGERY

1. Rest for the first 1-2 days. Keep your head elevated and sleep on at least two pillows. No heavy lifting or housework for 3-4 days. Do not bend over from the waist for the first week after surgery. No vigorous exercise for 2 weeks as it may increase swelling.
2. Following surgery, fill a bowl with cold water and ice. Using a clean wash cloth, place in bowl and partially wring out water. Lay the cold cloth across your eyes. You may do this continuously or for 20 minutes on and 20 minutes off, during waking hours only.
Continue as long as swelling is present.
3. Gently clean the incisions with several cotton balls with warm or cold water. If needed, gently clean the incisions with ½ peroxide/water mixture (for bleeding, crusting, or oozing).
4. You may experience discomfort for the first few days. Eyes may feel dry and scratchy for the first few weeks. A prescription for pain medication will be provided. Take the medication only if you need it. Never take pain medication on an empty stomach.
5. Begin taking sip of liquids as soon as possible after your surgery. You may progress to a regular diet as you tolerate it. Avoid spicy or greasy foods the first 24 hours as they may cause nausea.
6. A small amount of swelling and bloody drainage is to be expected. The amount of bruising and discoloration varies with each individual. Your eyes may also appear bloodshot. Avoid straining your eyes by such things as reading or watching television for the first day or two.
7. Wear dark glasses to protect your eyes from bright sunlight for the first several days.
8. Following surgery no contact lenses for 2 weeks. Be sure you have an updated pair of glasses.
9. Do not wear any eye makeup until you are told that you may do so by the Doctor.
10. Avoid direct sun exposure to your incision for at least 2-3 months
11. Things to report to the Doctor:
 - temperature of 101 degrees or more
 - excessive bleeding or swelling
 - pain not controlled by the pain medication
 - sudden or gradual loss of vision
 - nausea and vomiting

J. Michael Conkright, MD
Diplomat American Board of Plastic Surgery

4133 Gateway Blvd. Ste 170
Newburgh IN 47630
Phone 812-842-0240 Fax 812-842-0241
www.beautifultoo.com

Patient Name _____

Post-Operative Instructions

Ointment: Apply to sutures once at bedtime tonight only
(Keep this: Do Not Discard)

____ **Eye Drop:** One drop ____ times a day for ____ day (Do Not Discard)

____ **Oral Antibiotic:** Take as directed after meals until finished

____ **Ice:** 20 minutes on 20 minutes off or as instructed

____ **Shower:** Allow the water to gently fall on the BACK of your head, avoiding
direct contact with eyes

____ **Exercise:** No vigorous exercise for 2 weeks

____ **Make-up**

Artificial Tears

Contact Lens: Avoid for 10-14 days as instructed

____ **DO NOT DISCARD ANY MEDICATIONS UNLESS INSTRUCTED**

Other Instructions