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A Professional Corporation

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Aesthetic and Reconstructive  
Plastic Surgery



Patient Handbook

## TABLE OF CONTENTS

Introduction	1
Services Offered	1
Office Hours and Telephone	2
Directions	2
Education and Qualifications	3
The Consultation	4
The Importance of the Second Consultation	4
Ask Our Patient Counselor	5
Are You a Candidate for Aesthetic Surgery?	5
Medical Clearance	5
Psychological Clearance	5
Proper Motivation	5
The Importance of Commitment	6
The Importance of Realistic Expectations	6
The Importance of Supportive Family and Friends	7
A Note to Spouses, Family and Friends	7
The Importance of Communicating Your Aesthetic Perception	8
The Need for Patience	8
Your Financial Responsibilities	8
Your Financial Responsibilities for Complications	9
Scheduling Your Surgery	10
Where Will My Surgery Be Performed?	10
What Type of Anesthesia Will I Receive?	10
Options for Postoperative Recovery Location	11
How Can I Best Prepare Myself for Surgery?	12
Preoperative Instructions	12
The Preoperative Visit	13
Things to do on the Day of Surgery	14
How long will surgery take?	15
Postoperative Instructions-What to Expect After Surgery	15
Going Home	15
Appearance	16
Physical Activities	16
You must not fly for two to three weeks following surgery	17
Diet and Problems with Eating	17
Washing Your Hair	18
Pain Medications	19
Medications for Nausea and Vomiting	20
Antibiotics	20
Taking Your Regularly Prescribed Medications	20

Refilling Your Prescriptions	21
Eye Drops	21
Contact Lenses	21
Earrings	21
How Long Will I Be Bruised and Swollen?	22
What Is the Best Way To Remove the Ink Marks from My Skin?	22
When May I Resume Exercising?	22
When Will I Be Able to Return to Work?	23
Problems with Driving	23
Dealing with Visitors	23
Possible Misunderstanding Regarding the Results of Surgery	24
On the Road to Recovery	26
Coping with the Blues	26
Will I Have Scars?	27
We Want to Hear From You	27

## **INTRODUCTION**

Aesthetic and reconstructive surgery integrates art and medical science to enhance your appearance, function, self-image and sense of well-being.

The plastic surgeon has the unique opportunity to study the human form, its bones, muscles, skin and fat, as these tissues relate to each other in the living state. Experience gained from the treatment of traumatic injuries, cancer and birth defects afford the plastic surgeon a superb education in the handling of living tissues and in using these materials to reconstruct and create the human form in its optimal form and function. This experience is particularly applicable to the art of aesthetic surgery in which the surgeon attempts to enhance the patient's existing features.

We hope that we will be able to make your experience with aesthetic or reconstructive surgery as positive as possible, and to this end, we have designed this information as an introduction to our practice, services, philosophy, personnel and surgical facility.

## **SERVICES OFFERED**

We provide aesthetic and reconstructive plastic surgical services.

Aesthetic plastic surgery includes: eyelid surgery, facelifts, forehead lifts, chin enhancement, rhinoplasty, endoscopic surgery, liposuction, abdominoplasty, dermabrasion, chemical peels, Botox and other procedures.

Reconstructive plastic surgery may include: breast reduction, treatment of cleft lip and palate and cancer surgery.

One of our main objectives is to educate you as fully as possible so that you will feel comfortable with your decision for or against surgery. You will have ample opportunity to discuss your concerns with me and my staff.

We believe that a successful outcome from any medical treatment depends on a positive, healing relationship between the doctor, his staff and you, the patient. This is a

relationship that depends upon mutual trust, understanding, compassion and excellent professional care. A relationship like this does not happen overnight but is built from numerous interactions starting from the first telephone contact to the last postoperative visit. With this in mind, our office manager and patient counselor, Elaine Lannert, our operating room supervisor, Donna Righetti, R.N., our anesthesiologist, James Scheller, M.D. and I welcome you to our practice and thank you for taking the time to read this information.

### **OFFICE HOURS AND TELEPHONE**

Our office is generally open on Monday, Wednesday and Thursday from 9:00 a.m. to 12:00 noon and 12:30 p.m. to 4:00 p.m.

During these hours our staff is happy to make appointments, to discuss financial matters and to provide education and information specific to your particular needs.

### **PLEASE CALL (415) 461-1240**

We make every possible effort to stay on schedule as we respect the importance of your time. Occasional emergencies requiring immediate care or other urgent circumstances may result in a delay in your appointment. In this situation we will try to reach you by telephone to notify you of the delay and if necessary, to reschedule your appointment. If you are unable to keep an appointment time, please call our office as soon as possible. This courtesy allows us to be of service to other patients.

### **DIRECTIONS**

Based in Marin County, our office and surgical center is located at 1240 South Eliseo Drive, Suite 102 in Greenbrae, California 94904.

From San Francisco, it is approximately 17 miles and a 30 minute drive.

1. Take 101 North
2. Take the Sir Francis Drake Blvd. Exit towards San Anselmo (west)
3. You will pass Bon Air Shopping Center on the left.
4. At the third signal, make a left turn on Bon Air Road.
5. You will soon see Marin General Hospital on the left.
6. At the next signal, make a left turn on South Eliseo Drive.
7. We are the third building on the left hand side of the street. A sign indicating South Eliseo Medical Center marks our building at 1240 South Eliseo Drive.

From areas north of Marin County, take 101 South then follow instructions 2-7.

## **EDUCATION AND QUALIFICATIONS**

Dr. Minami received his undergraduate education at the **University of Southern California** where he received a full scholarship. He received a Bachelor of Science degree in 1962, magna cum laude.

Dr. Minami graduated from the **University of Southern California, School of Dentistry**, receiving his Doctor of Dental Surgery (D.D.S.) in 1965. He was awarded the Los Angeles County Dental Society Plaque for graduating first in his class, the Julio Endelman Memorial Award for Excellence in Periodontics and Oral Pathology, the J. Walter Reeves Award for Proficiency in Anatomy, the Psi Omega Award for Academic Achievement and the U.S.C. Dental Alumni Association Scholarship. He was elected to Omicron Kappa Upsilon (National Dental Honorary Society) and to Phi Kappa Phi (National All-University Honor Society).

After practicing dentistry for one year, he received a full scholarship to the **University of Southern California, School of Medicine**. He received the M.D. degree in 1970, and was elected to Alpha Omega Alpha (National Medical Honor Society). At graduation, he received the **Salerni Collegium Award**, which is given annually to the graduating senior whom by vote of his classmates best demonstrated the greatest dedication to patient care during his years in medical school.

From 1970 to 1971, Dr. Minami did a straight surgical internship at the **UCLA-Harbor General Hospital**. In 1971, he was awarded the UCLA-Harbor General Hospital Outstanding Surgical Intern Award and the awards for both Outstanding Performance in General Surgery and in Head and Neck Surgery.

He received his education in aesthetic and reconstructive plastic surgery at **Stanford University Medical Center** from 1971 to 1976. In 1974, he received training in cleft lip and palate surgery and cranio-maxillofacial surgery in Guatemala, France, Switzerland and Scotland.

Dr. Minami began his practice of aesthetic and reconstructive plastic surgery in Marin County in 1976, as an associate of Richard L. Dakin, M.D.

He was certified by the American Board of Plastic Surgery in 1977.

He belongs to the following professional societies:

- American Society of Plastic Surgeons
- American Society for Aesthetic Plastic Surgery
- American College of Surgeons
- California Society of Plastic Surgeons
- Marin Medical Society

In 1987, he was voted “Best Plastic Surgeon in Marin” in a survey sponsored by the Pacific Sun.

In 1997, he was included in “The Best Doctors in the Bay Area,” as published in San Francisco Focus Magazine.

In 1996-2000, he was included in “The Best Doctors in America, Pacific Region” based on votes cast by his professional peers.

In 2001-2010, he was included in “The Best Doctors in America.”

In 2001-2009, he was included in “Top Doctors” by the Editors of Consumers’ Checkbook Magazine.

In 2007, he and his wife June received the **Martin Luther King, Jr. Humanitarian Award** from the Marin County Human Rights Commission.

### **THE CONSULTATION**

The consultation is the foundation upon which your education in plastic surgery will be built and upon which your decision regarding surgery will be based. During this time you may express your concerns and goals. We will discuss the various alternative treatments and teach you about their benefits and risks. We ask that you do not bring small children with you. It is perfectly fine to bring your spouse, relative or interested friend with you. We also ask you to turn off your cell phone during the consultation.

The length of the consultation depends upon the number and complexity of the problems you wish to discuss. Initial consultations for aesthetic surgery last about one hour. You will receive educational reading material about the procedures you may be considering. We recommend that you read the literature carefully and write a list of questions for me about anything that is not absolutely clear to you.

### **THE IMPORTANCE OF THE SECOND CONSULTATION**

It is our experience that patients are sometime overwhelmed by the information overload of the first consultation. After you have had a chance to think about everything you have learned at the first consultation, and have read all the literature which we provided for you, please write a list of questions and call our office to set up a second consultation if you desire. There is no additional charge for further consultations. Bring your list so that we may complete your education regarding your concerns and their possible solutions. It may be helpful to bring along one of your supporters to this appointment. Before you schedule surgery, you should feel confident that you fully understand everything about your proposed surgery and its risks and that you are absolutely committed to the surgery and to me as your surgeon.

## **ASK OUR PATIENT COUNSELOR**

Our office manager and patient counselor, Elaine Lannert, has a wealth of information based on experience with aesthetic surgery since 1981. She is always available to answer your questions and to provide insight into the details of the preoperative, operative and postoperative periods. She will be able to allay your fears and provide you with needed support. Please feel free to call her at any time regarding your concerns.

## **ARE YOU A CANDIDATE FOR AESTHETIC SURGERY?**

### **MEDICAL CLEARANCE**

The ideal candidate for aesthetic surgery is a healthy person with no medical problems or moderate medical problems under good control by his/her physician. It is important for your safety that we are informed of all your medical problems so that we may consult with your physician and obtain his permission to proceed with surgery.

If you are fifty years of age or older, it will be necessary for you to see your physician for a preoperative history and physical examination and electrocardiogram.

Patients with serious illnesses such as severe uncontrolled diabetes, history of recent heart attack or stroke or severe clinical depression are not candidates for aesthetic surgery.

### **PSYCHOLOGICAL CLEARANCE**

It is critical that you tell us about any serious clinical depression and present or past psychiatric or psychological counseling. If you are in therapy, it is mandatory that you obtain clearance from your therapist prior to scheduling the operation.

Your therapist must be an integral part of our team and may be especially important in helping you get through periods of temporary depression which may occur in the postoperative period. It is my experience that patients who have a history of depression are more likely to be temporarily depressed after surgery.

### **PROPER MOTIVATION**

The motivation for surgery must come from within yourself. You must be internally motivated. It is perfectly acceptable and even positive for you to want to look as well as you can as long as it is not the result of external pressure from your spouse, agents photographers, friends or associates.

## **THE IMPORTANCE OF COMMITMENT**

Please recognize that there is a vast difference between fear and a lack of commitment.

It is perfectly normal to be afraid. The prospect of having an operation is potentially frightening especially when you make the choice to have the surgery voluntarily. It is normal to be concerned about whether the result will be as desired or whether or not there will be a complication. Some degree of fear is acceptable, lack of commitment is not.

You must be 100% committed both to the operation and to the surgeon you choose. This commitment must not change from day to day. If you are completely committed you have an excellent chance of being a happy patient. Such patients are able to weather complications calmly because they know in their hearts that they have chosen with great care. If there is any doubt about whether you want me to perform your surgery, I encourage you to obtain a second opinion from a qualified, board certified plastic surgeon. We will be happy to provide you with the names of excellent surgeons if you wish.

## **THE IMPORTANCE OF REALISTIC EXPECTATIONS**

It is critical that you have realistic expectations regarding the possible outcome of your surgery in order to avoid disappointment.

Results from aesthetic surgery are never perfect. Secret ideas of beauty are rarely, if ever, realized. Surgery will not solve personal problems nor will it get you a new job or spouse.

The decision for or against surgery must be internally motivated and not done in the hopes of adulation and praise from others, which when they do not occur, result in disappointment. You should not have surgery done because someone else wants you to, nor should you undergo surgery in situations of stress or crisis such as divorce or death of a loved one.

Patients vary widely as to the degree of improvement they anticipate. It is realistic for them to expect improvement based on the quality of the raw material that they bring to the operation. There are many factors besides the talent of the surgeon which determine the quality of the surgical result. Among these factors are: age, sex, medical and psychological history, smoking history, drinking history, weight and history of sun exposure.

Local factors which influence the results include: the thickness and quality of your skin, the thickness and quality of your subcutaneous fat, the quality of your bone structure, the proportions of your facial features, the attractiveness of specific anatomic structures, the density of your hair, scar tissue resulting from prior surgery, etc..

Take a hard, realistic look at the characteristics that you bring to your operation. A round, chubby face cannot be made thin. Deeply wrinkled, grooved and weathered skin cannot be made soft and smooth. A thick neck cannot be made swan-like. Certainly, improvements can be made. The objective of surgery is to provide as much improvement as possible within the limits imposed by your specific physical characteristics. Having realistic expectations is the single most important factor determining your happiness as an aesthetic surgery patient.

### **THE IMPORTANCE OF SUPPORTIVE FAMILY AND FRIENDS**

The support of family and friends is important. The best, supportive attitude sounds something like this, “You don’t have to do this for me, but if you want to do it for yourself, I will support you.”

If a family member or close person is strongly against your having surgery, then a careful discussion of the reasons for this opposition is essential. It is normal for such persons to fear for the safety of their loved one. Occasionally, envy or jealousy may be the underlying problem. It is important to examine these issues and put them to rest before surgery since negative persons may depreciate the result (“you don’t look any better”). This is destructive to the recovering patient. Furthermore, if there is a complication requiring additional surgery, and expense, serious conflict may ensue, (“I told you not to have the operation”). Conflicts about money are a well-known source of marital discord.

We are happy to discuss these issues with you and your loved ones. An additional interview often clarifies the situation, allays fears and eliminates harmful negativity. When you are recovering you need cheerful, positive energy. You don’t need a critic.

### **A NOTE TO SPOUSES, FAMILY AND FRIENDS**

The immediate postoperative period is often a difficult time for spouses, friends and loved ones who are the patient’s designated caregivers. The patient may look swollen, bruised and strange. This may frighten you. You may feel that you no longer recognize the patient as the person he/she once was. Be assured that these changes are temporary and that day by day, week by week and month by month there will be progressive improvement until the maximum benefit of the surgery is recognized. Our experience is that you might be frightened in the early postoperative few days and somewhat skeptical of the result for a few weeks. Sometime between three and six months you will recognize and acknowledge that, indeed, the patient looks very well.

Please note that the patient is extremely vulnerable during the early postoperative period and may even suffer a brief period of depression. It is at this time that she/he needs extra kindness and encouraging support. Critical comments (“you look awful,” “I told you not to do this,” etc.) are not only cruel but destructive to the patient’s psychological healing. Remember that recovery is both a psychological and physical process and that the patient does not need a critic at this time. Be positive and supportive and your efforts will be rewarded with great appreciation.

## **THE IMPORTANCE OF COMMUNICATING YOUR AESTHETIC PERCEPTION**

The truism, “beauty is in the eye of the beholder,” is particularly applicable to aesthetic surgery. We must understand your personal aesthetic perception, what you see as beautiful and attractive. In order to achieve your desired result we must communicate clearly as we work together. The final criteria for success of the operation will be your opinion of the result.

## **THE NEED FOR PATIENCE**

Remember that it has probably taken many years for your appearance to evolve to its present state. It has been a gradual process, often almost imperceptible from month to month or even from year to year.

Following surgery, you will experience a drastic change in your appearance that includes swelling, bruising and some stiffness of the tissue. Keep in mind that it will take three months or longer before swelling and asymmetries resolve. How long it takes you to look acceptable to yourself depends not only how fast the swelling and scar tissue resolve but also upon your personal psychology. If you are relatively “laid back,” you may feel that you look fine in a short time – days to weeks. If you are obsessive-compulsive in nature, it may take months or even a year or more for you to adjust to your new appearance. Final judgment about the result of your surgery should be reserved for a full year. Your follow-up will include an appointment one year from the date of your surgery to make this assessment.

Please feel free to discuss these matters with us and we will try to give you peace of mind. **Remember that rejuvenation through aesthetic surgery, like most forms of renewal, is a process and not an event.**

## **YOUR FINANCIAL RESPONSIBILITIES**

It is our policy that all fees for aesthetic surgery must be received three weeks before the scheduled surgery date. Payment is by check only. If we have not received your payment by that time, your surgery date may be released for another patient to use. There are some very good reasons for this policy that I will be happy to discuss with you if you wish. One of the main points is that payment in advance is a strong statement of your commitment. It is imperative that you are 100% committed to the operation and 100% committed to me as your surgeon.

Another important point is that you must be able to afford the possible additional costs of treatment for complications. If you cannot afford the cost of a complication, you should reconsider having elective surgery. Advance payment of the surgical charges is an

indication, but not assurance, that you have the financial reserve to afford both the operation and possible complications.

### **YOUR FINANCIAL RESPONSIBILITY FOR COMPLICATIONS**

We make every effort to avoid complications. Obviously, we would like to assure you of a complication free experience but that is not possible.

In general, I will treat complications of aesthetic surgery without charging you a surgeon's fee. If the procedure can be done in our minor surgery room or in our operating room, I will not charge a facility fee. That is, following a complication of aesthetic surgery, I will not charge you for my services or for the use of my facility. You will be responsible for all costs of materials and services which I cannot provide myself, such as anesthesiologist's fees, laboratory tests, consultant's fees, hospital charges, prescription medicines, etc.. For example, if you were to get an infection such as an abscess that required draining, I would perform the drainage operation in minor surgery at no charge to you. However, you would have to pay for the antibiotics and the culture and sensitivity testing.

In the unusual case that your insurance pays for the treatment of complications of aesthetic surgery, we will accept your insurance company's payment as payment in full.

As you must be aware by now, we make a great effort to avoid complications. Fortunately, most complications following aesthetic surgery are modest and easily treated. Nevertheless, there is a very small possibility that a major complication will require hospitalization, consultation with other doctors, a trip to the hospital operating room, anesthesiologist's fee, etc.. This scenario is extremely rare, but should it occur, the expenses may run into many thousands of dollars. You will be responsible for paying these expenses. In general, the usual medical insurance policies no longer pay for the treatment of complications resulting from aesthetic surgery. We recommend strongly that you ask your insurance agent if your policy covers complications of aesthetic/cosmetic surgery. If the answer is yes, get it in writing.

Please understand that this policy does not include the treatment for changes that result from the "natural history" of an unfavorable patient characteristic. For example, the early sagging after a facelift seen in some patients with severely sun damaged, weathered, leathery skin is not considered a complication but rather a natural and expected event. Such a patient may desire a secondary facelift to take up the slack and give a more lasting result. The patient will be responsible for the expenses of this second operation. The policy also does not include what I may interpret as unreasonable requests for more surgery in attempts to achieve perfection.

## **SCHEDULING YOUR SURGERY**

When you are absolutely committed to the surgery, you may call our office and our office manager, Elaine Lannert, will schedule your procedure and a preoperative appointment that will take place about three to four days prior to surgery.

In planning your date, please keep in mind that for three to four weeks before the operation, you must be free of aspirin, Advil, alcohol and other medications that may cause postoperative bleeding.

## **WHERE WILL MY SURGERY BE PERFORMED?**

Your operation may be performed either at our outpatient plastic surgery facility which is accredited by the American Association for Accreditation of Ambulatory Surgery Facilities or at Marin General Hospital.

The vast majority of our aesthetic operations are performed in our facility where patients are pleased by the ultimate in privacy while being treated in a safe environment by a specially trained and experienced professional staff. Our facility utilizes monitoring devices and special equipment for liposuction and endoscopic surgery as well as having its own independent emergency power supply.

Not all patients are able to have surgery in our facility. Patients with medical problems such as heart trouble and patients who desire to have surgery under general anesthesia are operated upon at Marin General Hospital either as an outpatient or with an overnight stay. We have a positive relationship with Marin General Hospital that dates back to 1976. The advice of your personal physician will be important in helping to make the decision as to where the surgery should take place.

## **WHAT TYPE OF ANESTHESIA WILL I RECEIVE?**

There are four basic choices:

### **1. Local anesthesia alone**

In the past, local anesthetic injections were painful and often the most feared part of having an operation. Recent innovations have made having local anesthesia very comfortable. First, the acidic local anesthetic solutions are neutralized with a buffer solution. Second, the solutions are injected through the thinnest needles available for human injection. Third, the injections are performed slowly to avoid rapid expansion of the tissues. Fourth, the solutions are warmed to body temperature.

### **2. Local anesthesia with oral sedation**

This method is used for many patients having eyelid surgery. The patients feel relaxed and frequently fall asleep on their own. Often they have no memory of the surgery.

### **3. Local anesthesia with intravenous sedation given by our anesthesiologist.**

For patients who wish to have complete control over how they feel during the procedure, this method is best. The patient may tell the anesthesiologist exactly how they wish to feel and the anesthesiologist will be able to provide sufficient medication to achieve this goal. This method is essential for patients with high levels of anxiety, restless leg syndrome, bad backs, high blood pressure and those having multiple procedures or operations lasting several hours. The anesthesiologist provides the patient with assurance that he/she will experience no discomfort during the procedure.

### **4. General anesthesia**

This method is useful for highly anxious patients who want to have no awareness whatsoever of the surgery. The surgery is done at Marin General Hospital and the patient usually stays overnight and is discharged the morning after surgery.

## **OPTIONS FOR POSTOPERATIVE RECOVERY LOCATION**

Your safe and comfortable recovery is important to us. We must insist that you not be left unattended for at least twenty four hours following surgery.

#### 1. Going home or staying with a friend

A responsible adult must be available to care for you during the first twenty four to forty eight hours following surgery. This person must be able to provide transportation for you should it become necessary for you to return to the office for urgent care.

#### 2. Specialized recovery facilities

An experienced registered nurse has set up her home to care specifically for postoperative plastic surgery patients. We have found her to be a caring and capable individual and our patients have appreciated her services. Her home is only five minutes from mine, making it very convenient for me to see patients on my way home. In addition, if there are any problems, she can call me and I can be at her facility within five minutes.

The nurse will pick you up at our office after surgery is finished and bring you back for your appointment the next day. If you live nearby, she is available to take you home following your postoperative appointment with me.

#### 3. Marin General Hospital

We are located one block from Marin General Hospital which can provide you with excellent postoperative care. Arrangements can be made for you when appropriate.

#### 4. Hotels

There are excellent local hotels available at reasonable prices within ten minutes of our office. If you are coming from a distance and wish to use this option, we will be able to make recommendations for you. Please ask our Office Manager.

### **HOW CAN I BEST PREPARE MYSELF FOR SURGERY?**

#### **PREOPERATIVE INSTRUCTIONS**

Careful preoperative preparation is the key to a successful surgical experience. The three or four weeks prior to surgery are an important period of time for you to prepare mentally, physically, medically and emotionally. Please do the following:

**1. Do not take aspirin or medication containing aspirin for one month prior to surgery** since it interferes with normal blood clotting. Substances containing aspirin increase bruising and the possibility of bleeding during and after surgery. Do not take Bufferin, Cheracol, Corocidin, Emperin, Excedrin, Alka-seltzer, or Anacin. Do not take non-steroidal anti-inflammatory drugs like Advil, Aleve, Ibuprofen, etc. **Take Tylenol instead.**

Included in your information packet is a list of other medications you must avoid. If in doubt, call our office for advice and/or check with your pharmacist.

Do not take Vitamin E or cough or cold remedies for one month prior to surgery as they may also interfere with the clotting process.

Fish oil tablets, garlic, papaya juice, meat tenderizers and large amounts of herbal supplements also may increase the possibility of bruising and bleeding. Please do not take any of these substances for at least two weeks prior to surgery.

**2. Eliminate alcohol.** Alcohol causes easy bruising and lessens the ability of the liver to both metabolize medications and produce clotting factors. If you are a heavy drinker, you are at increased risk for excessive bruising and hematoma formation following surgery. It may be necessary for you to take extra Vitamin K and to have liver function tests prior to surgery.

The importance of not drinking alcohol before surgery: As a general rule we ask patients not to drink alcohol for approximately three to four weeks prior to surgery. Once or twice a year, when a patient comes for his/her preop visit and is asked whether or not he has been drinking, he will say that he had a glass of wine last night. When I ask him why he did this when he was carefully instructed not to drink for at least three weeks prior to surgery, he often responds, "Well, it was my anniversary and I had to have a drink," or "It was my birthday and I had to have a drink."

Please understand that there are no exceptions to this rule and that if the bleeding tests turn out to be abnormal, your surgery will be cancelled regardless of the trouble you have gone through to arrange this specific date. If the bleeding tests are abnormal, there is no compromise. The surgery will be cancelled. Please do not take this chance and jeopardize your surgical date or increase the risk of bleeding complications.

**3. Eliminate recreational or social drug use.** Even small amounts of marijuana, cocaine or other illicit drugs can have a serious impact on your anesthesia and healing. Please stop at least one month prior to surgery.

**4. Stop smoking.** It is extremely important that you gradually decrease and then stop smoking four weeks prior to surgery and for three to four weeks after surgery. Smoking seriously impairs the ability of tissues to heal by diminishing blood flow to the tissues. If you smoke, you are at increased risk for infection, bleeding and delayed healing.

**5. Reduce stress.** Try to avoid getting run down before surgery. Organize your time and get sufficient rest. It is not wise to fill your life full of stressful activities prior to surgery. For example, don't schedule surgery one month before your daughter's wedding.

**6. Avoid being around anyone who is sick.** You do not want to run the risk of catching something before surgery. Report any signs of a cold, infection, boils or pustules appearing three weeks before surgery. Often times, early treatment of these problems may affect a rapid cure and prevent cancellation of the surgical date.

**7. Women must be sure that they are not pregnant before surgery.** If there is any doubt, a pregnancy test may be necessary.

**8. Arrange for help with daily responsibilities and chores.** You will need help for the first few days following surgery.

**9. Arrange for a responsible adult to bring you on the day of surgery and to take you home.** A responsible adult must also be "on call" for you during the first twenty four hours following surgery because of the very small chance that you may need transportation back to our office or to the hospital.

**10. Do not eat or drink anything after midnight on the night before surgery.** You must come on the morning of surgery with an empty stomach. You may brush your teeth and rinse your mouth but please spit out the water.

### **THE PREOPERATIVE VISIT**

When you schedule your surgical date, our Office Manager will also set up a preoperative visit which will take place a few days prior to your surgery. At this visit, we will review the proposed surgery, examine your heart and lungs, check your vision, give you prescriptions for postoperative medications and order the necessary laboratory tests

which will include a complete blood count and bleeding tests. We will also obtain photographs and review your operative consent form that we will have you sign at this visit. The preoperative visit takes from fifteen to thirty minutes depending upon the complexity of the procedures you are going to have.

**In preparation for this visit, please review all of our educational reading material and take a few minutes to write a list of questions for me to answer.**

### **THINGS TO DO ON THE DAY OF SURGERY**

1. Shower and shampoo your hair and wash your face and ears using your usual soap and shampoo. As an alternative, you may be given Betadine surgical soap to use as soap and shampoo. Do not apply conditioners or moisturizers.
2. Do not eat or drink on the morning of surgery with the following exceptions. If you are taking daily medications prescribed by other doctors, for example, for high blood pressure, you should take those medications as usual with the exception of drugs like aspirin or Advil. Be sure to use the smallest possible amount of water. If there is any doubt in your mind, check with me. We may ask you to take antibiotics on the morning of surgery. Your preoperative sedatives will be given to you upon your arrival. Let us know if you have had any allergies or difficulties with drugs or medication in the past.
3. Do not wear makeup or hairspray of any kind.
4. Do not wear contact lenses.
5. Wear comfortable, loose fitting clothes that do not have to be put on over your head. A jogging outfit is an excellent choice. Do not wear panty hose or girdle. Wear flat shoes – no high heels.
6. If you have artificial or plastic fingernails, please remove one of them. We need one finger that is free of nail polish for monitoring purposes.
7. Bring dark glasses and a scarf to wear after the operation if you are having facial surgery.
8. We cannot be responsible for jewelry, cash, contact lenses, wristwatches or other important items. Please do not bring them with you.
9. As mentioned previously, a responsible adult must accompany you to our facility and there must also be a responsible adult driver to take you home. Upon arrival at our office, give the nurse or office manager the driver's name and telephone number, as well as the telephone number and address where you will be after surgery. Remember that a responsible adult must be available to assist you during your recovery.

10. It is absolutely normal for you to have some element of fear and anxiety.

### **HOW LONG WILL SURGERY TAKE?**

The duration of surgery depends upon the nature and number of procedures. Here are some rough estimates.

Upper eyelid surgery usually takes approximately one hour.

Lower eyelid surgery usually takes from one to one and one half hours.

Facelifts take from three to four hours.

Forehead lifts take about two hours.

Rhinoplasty usually takes two hours.

Breast reduction usually takes three hours.

Abdominoplasty usually takes three hours.

In addition to the duration of surgery, there will be a recovery period of one to two hours prior to your being discharged from our facility.

### **POSTOPERATIVE INSTRUCTIONS - WHAT TO EXPECT AFTER SURGERY**

You will receive written information for each operation you are having which includes specific postoperative instructions. The following are some general postoperative instructions with universal applications.

### **GOING HOME**

You are already aware that you must have a responsible adult to drive you to your home or hotel after surgery. Please have an adult drive you back to our office the day after surgery for your first postoperative visit. An adult must also be with you for the first forty-eight hours after surgery.

It is important for your driver to drive slowly and carefully and to avoid taking corners too fast as this may cause you to become nauseous. When you get home, have your driver lead you by the arm and assist you into your place of recuperation. If you have stairs to climb, it is wise to take them a few at a time and rest if you become tired or out of breath. If you become dizzy, simply sit down on the stairs immediately and rest for a few minutes before continuing. If you have more than one flight of stairs, it is wise to sit down and rest between flights. It is important for you to be aware that your balance may not be normal because of the sedative medications given to you during surgery. Due to

the sedative medications, you are at a greater risk to have a fall or accident. If the person assisting you is elderly or weak, please make arrangements to have a second person meet you to physically assist you in climbing stairs. Please notify our office if you anticipate that you will have problems with these matters.

If you have had any sedation whatsoever, you will not be allowed to drive your car home alone or to take a cab home alone. It is permissible for you take a cab home if you are accompanied by a responsible adult.

**Once you are settled at home or your place of recuperation, please call our office (415) 461-1240 to confirm that you are safe.**

### **APPEARANCE**

It is natural for you to be excited about your surgery. You may want to stand in front of a mirror to see how you look, but we do not recommend this during the early recovery period. Some degree of bruising, swelling, asymmetry and numbness is to be expected. After receiving anesthesia and various medications, your emotional state may be somewhat vulnerable and your overall appearance can be upsetting if you are not prepared.

Anxiety and nervousness is normal at this point. We want to reassure you that all patients feel this way. These feelings will diminish rapidly as your recovery progresses and the swelling and bruising resolve.

### **PHYSICAL ACTIVITIES**

If you have had a facelift, when you get home, stay quietly in bed with your head elevated on three pillows. Be sure to position the pillows so that your head does not flex forward into a “prayer position” with your chin towards your chest. The “prayer position” may result in excessive pressure on the incisions behind your ears or compromise the blood supply to the skin, resulting in poor healing. Place a pillow or two to support your shoulders and upper back so that your head and neck appear as you would if you were looking straight ahead with your chin up in a proud position.

We recommend that you take deep breaths to exercise your lungs. Change positions while in bed or while lying on the couch to decrease back discomfort. Move your legs from side to side and up and down and flex your ankles intermittently to improve your circulation and to decrease stiffness.

For the first two or three days it is best that you take it very, very easy. Spend most of your time in bed with your head elevated on three pillows or spend time sitting in a chair or on a sofa. When you feel steady, you may walk around the house slowly. Little by little you may increase your activities.

Avoid any exertion. Do not lift, strain, exercise or bend over. It is extremely important that you do not do any aerobic exercise or activity for three weeks following surgery. No treadmill, rapid walking, climbing uphill, stationary bicycle, hiking, etc. **If you have any doubt about what we mean by aerobic activity, just remember that you must not do anything that will raise your heart rate or blood pressure. Aerobic activity will increase your risk of bleeding, hospitalization and expense.**

It is not unusual to feel lightheaded if you get up too quickly. Be sure to sit at your bedside for a few minutes prior to standing up to avoid dizzy spells while walking. Stand up very slowly and walk very slowly. If you must climb stairs, take them one at a time. Face the railing or banister and hold on with both hands. An assistant should walk behind you as you go up the stairs and stay in front of you as you come down. If you feel dizzy, sit down immediately without worrying where you are. Never walk alone if you feel lightheaded. Ask for help.

If you have house pets, be especially careful that they do not jump or climb on you while your incisions are healing.

You may be up for meals, to read or to watch television even during the first few days after surgery.

### **YOU MUST NOT FLY FOR TWO TO THREE WEEKS FOLLOWING SURGERY**

Except in the case of emergency, we discourage you from flying for the first three weeks after surgery. The change in pressure at altitude even in a pressurized cabin may result in bleeding, hematoma formation and delayed healing. Please ask if you have any questions regarding this request.

### **DIET AND PROBLEMS WITH EATING**

It is normal to have little appetite for a few days following facelift surgery, but drinking fluids is important at this time. You might try some good old American chicken soup (low salt) if it is available. Drink plenty of juice to prevent dehydration and decrease constipation. Avoid salty foods which may result in water retention and increased swelling. Avoid salt, caffeine, spices and excessively fatty food or high fat dairy products. Yogurt is helpful in relieving nausea in some patients.

If you have had a facelift, it is possible that you may experience difficulty in opening your mouth widely during the first week or two after surgery. You may also feel discomfort in your chewing muscles and in your jaw joint. You may find it necessary to eat soft foods and to take very small bites of soft foods. It may be painful for you to chew. Your bite may be off for one or two weeks.. All of these problems are temporary. The reason they occur is that during the facelift, the dissection of the deeper tissues occurs around the chewing muscles (masseter muscle).

In addition, you may find that your cheek immediately in front of your ear becomes more tense, swollen and painful during eating. This may be due to some irritation off the parotid salivary gland in your cheek. This gland may become irritated and swollen from the dissection immediately superficial to it. All of these problems are self limited and will gradually improve over the first week or two.

If you experience severe, long lasting pain and swelling after eating, please notify my office immediately.

### **WASHING YOUR HAIR**

If you have had a facelift, you will be allowed to shower and shampoo on the second or third day following your surgery. It is important that the shower water be luke warm and not hot. The water should be turned on to a modest flow and the shower head should be adjusted to a fine spray. You may use your own shampoo and conditioner. Be very careful and gentle with your fingertips applying the shampoo. Avoid any vigorous scrubbing motions as they may result in bleeding or hematoma formation.

You will find that your first shampoo is a welcome and pleasant event on your road to recovery. You may also note that there are some loose hairs on the shower floor. These are not hairs that are falling out, but rather hairs that have been cut during your surgery and are simply loose and washing out. This is not a matter for concern. Remember that we do not shave any of your hair but a number of hairs will be unavoidably cut. These hairs will eventually grow back.

In drying your hair and face use only a blotting or gentle patting motion. Do not rub as any friction on your skin or scalp may disrupt the fine blood vessels that are involved in your healing process and result in bleeding or hematoma formation. Be extremely gentle. Do not try to wash all of the residual blood out of your hair in one shower. It will take several showers before your hair is perfectly clean. This is normal and to be expected. You may use a blow dryer to dry your hair but only on the “cool” setting. Be aware that your face and scalp may be numb in certain areas and these areas are subject to serious burn injuries if a warm or hot hair dryer is used. If you have any questions regarding the use of the hair dryer, please ask as we wish to avoid any complication related to the use of this instrument. Do not vigorously comb or brush your hair as the traction or tension on the hair may disrupt the suture line or result in bleeding or hematoma formation. Be extremely gentle.

Please do not color your hair for three to four weeks after surgery.

## **PAIN MEDICATION**

You will be given a prescription for pain medication at the time of your preoperative visit.

Please have the prescriptions filled so that the medication will be available should you need them.

In general, patients having eyelid surgery have very little discomfort and Extra Strength Tylenol is sufficient for pain relief. Please obtain a bottle of Extra Strength Tylenol. Nevertheless, an occasional patient will require a stronger pain medication and if you experience significant discomfort unrelieved by Tylenol, do not hesitate to take the prescribed medication. It is important to keep pain under control because if you are suffering, your blood pressure may rise and this may lead to undesirable bleeding. Do not take the pain medication on an empty stomach as this may lead to nausea and vomiting. **Once again, we must remind you not to take any aspirin containing products or Advil, Motrin, Ibuprofen, Aleve, Naprosin, etc., for at least two weeks following surgery.**

Pain medications are generally central nervous system depressants and may cause drowsiness. If you are taking prescribed pain medications, you should not drive, use potentially dangerous equipment or make important decisions.

Pain medications cause constipation. You should drink lots of liquids and maintain a high fiber diet. If you become constipated, you may take a laxative. Do not take your pain medications with any other pain medications that you may have previously obtained. It is important not to mix pain medications or take them in combinations.

**It is important to remember not to drink any alcohol for two weeks following surgery.**

Alcohol in any form increases your risk of bleeding complications. Please notify us if it is your custom to use sleeping medications on a regular basis. It is very easy for patients who are on pain medications to become confused and use sleeping medications and pain medications inappropriately. This could be dangerous. If you are taking sleeping medications, they should be given to you by a responsible adult. Although it is very uncommon it is possible for pain medications to cause you to have bizarre thoughts or behavior. If you sense this is happening to you or others have noticed a change in your thinking or behavior, please report this to us immediately and discontinue the pain medications at once.

Take medications according to instructions on the bottle. If taking strong narcotics or if other pain medications make you feel drowsy or “spacey” have someone else provide you the medications at the proper intervals. Under such circumstances you could forget and take them too often. Equally important is to take medications at the prescribed time,

Avoid all aspirin, aspirin products, fish oil supplements and Vitamin E over 400 units per day. Please refer to the sheet in your packet for a list of medications to avoid. Unless otherwise instructed, continue with your regular prescriptions such as blood pressure, birth control, thyroid and hormone medications.

Take pain medications as soon as you begin to feel discomfort. Don't wait until the pain becomes stronger and more bothersome. It is important to have relief from pain since pain may cause your blood pressure to rise and increase the chance of further bruising or bleeding. If you experience severe pain which is unresponsive to pain medication, you should notify us at once.

### **MEDICATIONS FOR NAUSEA AND VOMITING**

It is very important to avoid nausea and vomiting in the postoperative period because this may lead to bleeding and hematoma formation. We try to avoid this situation by giving you anti-nausea medications during surgery. If you have a history of becoming nauseous easily or have had this problem from previous surgery and anesthesia, please let us know. We will prescribe anti-nausea medications in the form of pills or suppositories for you to use prior to taking the prescribed pain medications.

### **ANTIBIOTICS**

Infection is very rare after eyelid operations and it has not been our routine to prescribe antibiotics for patients undergoing these procedures. However, if you are having a facelift or an implant of any kind consisting of fat or other tissues or materials, or have a history of previous infection, we may ask you to take antibiotics before and after surgery. Please be sure to let us know if you have any allergies to antibiotics.

If you are taking antibiotics you should eat yogurt, drink acidophilus milk or take lactobacillus capsules to decrease the possibility of yeast infections. Although rare, if you notice a genital rash, slight itching or whitish discharge, call our office for a prescription which will combat yeast infection. If antibiotics are prescribed, take them regularly and continue until they are all gone.

### **TAKING YOUR REGULARLY PRESCRIBED MEDICATIONS**

It is important that you resume taking all of your medications prescribed to you by your physician after surgery. We are particularly concerned that you take your medications for high blood pressure as high blood pressure is a known cause of excessive bleeding and hematoma formation.

Please do not take any vitamin supplements or other substances given to you by others.

## **REFILLING YOUR PRESCRIPTIONS**

If you anticipate that you will be running short of medications and the weekend is approaching, please notify us so that we may renew your prescriptions. **Please be sure to call during office hours, preferably in the morning.** Please provide us with the name and phone number of the pharmacy you wish to use. The Office Manager will have to contact me to obtain permission to call the prescription in for you. Having the phone number available for her will facilitate the process. **Please note that the on-call plastic surgeon will not fill pain medication prescriptions during the weekend.**

## **EYE DROPS**

If you are having eyelid surgery, you will be given eye drops before and immediately after surgery to try to diminish or prevent the formation of fluid collection beneath the conjunctiva of the eye. If you do get such a fluid collection, it will diminish over a period of several weeks and finally disappear.

It is permissible for you to use “artificial tears” as often as you wish. Most patients do not find this to be necessary. However, if you have even a mild dry eye condition, then you will find the artificial tears to be soothing. Do not use Visine or Murine or other eye medications that you may have previously obtained without first checking with our office.

## **CONTACT LENSES**

Please remove your contact lenses prior to coming for surgery. If you have had eyelid surgery, you should not wear your contact lenses for at least two weeks after surgery. We wish to avoid manipulation of the eyelid skin which may result in disruption of the incisions and delayed healing and/or increase scar tissue formation. If you have chemosis (blisters on the eyeball), you may have to delay wearing contact lenses for a longer period of time, possibly four to six weeks.

## **EARRINGS**

Please do not wear earrings for at least one month after facelift surgery. The suture line around the earlobes is very delicate and subject to disruption with any manipulation of the area, however gentle. Even wearing small pierced earrings can cause separation of the earlobe from the cheek and clip-on earrings are definitely out of the questions.

It is important to not wear heavy or dangling earrings for a few months after surgery.

## **HOW LONG WILL I BE BRUISED AND SWOLLEN?**

The amount of bruising and swelling varies from patient to patient and cannot be perfectly predicted. Generally, bruising lasts for two to four weeks. Swelling usually increases for the first two to three days and then gradually diminishes over the next two or three weeks. Even two weeks after a facelift, your face may look somewhat swollen as if you had gained a few pounds. Usually the swelling is down enough for you to interact socially without attracting too much attention within two weeks.

You should be aware that your perception of your appearance is far more critical than that of others who may not even notice the change in your appearance.

Some patients feel that taking Arnica and Bromelain is helpful in reducing the bruising and swelling. These are homeopathic remedies which are obtainable at any health food store. If you are interested in trying these substances, please ask me about them.

## **WHAT IS THE BEST WAY TO REMOVE THE INK MARKS FROM MY SKIN?**

The ink used to mark your skin is not permanent. It is best to allow this ink to wash off gradually over a period of days. Please do not make any effort to scrub off the marks in any way since pressure on the skin may cause bleeding beneath the skin and lead to hematoma formation. Remember that the skin has been detached from the deeper tissues and is now in the process of reattaching itself. Rest assured that the marks will disappear after a few days of showering with soap and water.

## **WHEN MAY I RESUME EXERCISING?**

This is a very important question because exercise generally results in an increase in heart rate and blood pressure and these may in turn increase the risk of bleeding and bleeding complications such as hematoma formation or loss of vision.

We live in an area where exercise is a routine and part of daily life for many patients. Patients vary in what they consider exercise. For example, I once had a postoperative patient come into the office wearing jogging shorts and sweaty after a two mile run. When I asked why he had been exercising against my advice, he responded that he did not consider a two mile run as exercise since he was a marathon runner. Because of this, we have established a relatively simple rule. **For the first three weeks after surgery you should not do anything that is going to elevate your heart rate or blood pressure.**

After the first postoperative week, you may take long and slow walks on flat ground. After two weeks, you should avoid any heavy lifting as severe bleeding has been reported between one and two weeks postoperatively, resulting from lifting heavy laundry baskets.

After three weeks, you may resume your exercise program but start lightly and gradually build up your exercise routine. Even if you have had no complications and are

completely healed, you should wait three weeks before beginning any sports activity which puts you at risk for injury to your face or eyelids.

**You may return to your normal exercise schedule at the end of three weeks following surgery.**

### **WHEN WILL I BE ABLE TO RETURN TO WORK?**

The answer to this question depends upon:

1. The physical nature of your work.
2. How you must look when you return to work

If the physical requirements of your job demand that you do heavy lifting, straining or other activities which significantly increase your heart rate or blood pressure, you will have to be off of work for two to three weeks.

If your job does not have heavy physical requirements, you may return to work whenever you feel that your appearance is acceptable. Some individuals return to work within three to four days even with bruises or facial swelling because they are not self conscious and they do not have to do physical labor. Others wait significantly longer because they must look closer to normal before meeting the public.

There is a wide variation in how individuals perceive themselves. When your appearance is good enough for you to return to work will depend upon your own personal perception of your appearance. This may vary from a few days to even a few weeks.

### **PROBLEMS WITH DRIVING**

Following a facelift, your neck will be quite tight and somewhat stiff for the first week or two. During this time it is important to avoid any strong turning of your neck. Therefore, you must be careful while driving since you may not be able to look over your right shoulder to check your blind spot as easily as you have done prior to surgery. You will have to make better use of the rearview mirror. It would be best to avoid any significant swiveling of the neck during this time. If there is any doubt, please arrange to have someone drive you.

### **DEALING WITH VISITORS**

Friends and relatives may be anxious to drop by and see you after the surgery. Your feelings may fluctuate about visitors. At times you may want to share your excitement with the people you are close to. Their visits may also alleviate some of the fears and concerns that everyone experiences after surgery. This “support system” is very important during any period of recuperation.

Much of the time, however, you may want nothing more than to be left alone to sleep or rest. Communicate to your family and friends how important their visits are but explain to them that you need your rest. Assure them that as you regain your strength, they will be welcome to visit more often. Keep in mind that for a few days you must limit your activities and the amount of stress in your life. If you have had facial surgery, you must also limit your talking, chewing and laughing during the first few days of recovery. In general, it is best to make this early postoperative period as stress free and quiet as possible. You do not want to increase the risk of bleeding.

### **POSSIBLE MISUNDERSTANDING REGARDING THE RESULTS OF SURGERY**

We make every effort to make our explanations regarding the results of surgery clear and understandable, but it has been our experience that the following issues may arise during the postoperative period. The purpose of this section is to underscore the importance of understanding these issues in order to prevent disappointment when unrealistically expected results are not achieved.

#### **Residual wrinkles and pleating of the anterior neck skin may persist following a facelift**

Patients who have significant wrinkles and pleating or vertical lines in the anterior neck skin prior to surgery sometimes expect that all of these lines will disappear after surgery and that the anterior neck skin will be perfectly smooth. It is reasonable to expect improvement and although great improvement is often achieved, some wrinkles and vertical lines will undoubtedly be present after surgery. This can be disappointing if the patient expects a perfectly smooth neck. Soon after surgery the skin is very smooth, tight, swollen and free of wrinkles. This temporary condition may lead to disappointment when the swelling recedes and the skin regains its normal texture and some wrinkling reappears. It is important to remember that the facelift does not change the intrinsic quality of the skin but rather improves it by stretching it somewhat. Wrinkles and pleats represent the aging process, loss of elasticity and the effect of sun damage to the deeper layers of the skin over many years. These conditions are not reversed by a facelift. The facelift does not change the quality of the skin.

An analogy from the garment industry illustrates this problem. For example, if one is creating a garment from a bolt of new, smooth and undamaged cloth, one may expect the garment to be free of defects. On the other hand, if the garment is being fabricated from used, old or damaged cloth with imperfections, it is impossible to create a smooth and beautiful garment. All the ironing in the world will not change the quality of this cloth and make it new. It is important to understand this concept because the quality of the finished product depends greatly on the quality of the materials used to create the product. The same is true regarding the results of plastic surgery.

None of us like to hear that our skin is sun damaged, wrinkled and inelastic but this reality must be seen and accepted by the patient in order to prevent postoperative disappointment.

### **The facelift will not improve lip wrinkles.**

We occasionally have patients who believe that having a facelift will result in a smoother appearance of the wrinkles they have on their upper and lower lips and chin. Wrinkles in these areas are not affected by the facelift. You can demonstrate this for yourself by lifting your cheek and jowls with your hands and observing the effect of this action upon your lips. You will note that the lip wrinkles really do not change at all. It is important to realize this because if you expect the facelift to improve the lip wrinkles, you will be disappointed. Correction of the lip wrinkles requires direct treatment of the wrinkled skin. Fortunately, treatment is safe and effective.

### **The problem of the chin-neck angle**

The dramatic angle between the chin and the neck seen in many photographic models is an ideal which most of us would like to have. Unfortunately, the chin-neck angle depends upon the anatomy of the chin, its strength and the position of the larynx and hyoid bone of the neck. If these latter structures are in a relatively vertical arrangement there may be a dramatic angle even approaching 90 degrees between the chin and neck. Most people have the larynx lying obliquely, to some degree, leaving an obtuse angle between the chin and the neck. In patients with this finding, the maximum treatment of the area including liposuction and redraping of the skin and neck muscle (platysma) will still fall short of achieving a dramatic change. Patients with this type of anatomy must recognize that their anatomy limits the drama which can be achieved by surgery in order to avoid disappointment.

### **Persistence of some small bands in the anterior neck**

Patients who have extensive vertical muscle bands (platysma bands) in the anterior neck usually have some persistence of these bands despite our best efforts to correct them.

### **Redness of the skin following a facelift**

It is possible that there may be areas of redness of the skin following a facelift. This is particularly true in patients who already have some redness particularly on the sides of their necks but the redness can occur anywhere including the face and cheeks. This redness usually resolves but it takes a long time, possibly even a few years.

### **The persistence of animation wrinkles (crows feet) after eyelid surgery**

It must be understood that the wrinkling in the eyelid skin and crows feet area which occurs when one smiles or laughs or otherwise animates the area is due to muscle activity and persist after eyelid surgery. In some cases, the muscle activity may be reduced at the

time of a facelift by multiple small incisions through the eyelid closing muscles, but it almost always persists to some degree. Lower eyelid surgery usually results in smoother lower eyelid skin. However, depending upon how much presurgical wrinkling there is, the results may vary from modest to great improvement in the resting state when the patient is not animating the eyes. Even patients whose eyelids look quite smooth when they are at rest may have significant wrinkling and crows feet when they are animating. This is normal and to be expected. Awareness of this phenomenon is important to prevent postoperative disappointment.

### **The problem of fullness of the upper eyelid just below the lateral eyebrow**

Some patients complain of fullness of the tissues below the lateral eyebrow and believe that an upper blepharoplasty or upper eyelid operation will eliminate this fullness. This area of sub-brow or under the brow skin excess is usually due to lowering or drooping of the eyebrow with age. This area is not removed during the usual upper eyelid operation and will persist after the upper eyelid operation. Therefore, it is important for patients to understand that the eyelid operation by itself will not eliminate this sub-brow fullness.

The correction of the sub-brow fullness requires an eyebrow lift or forehead lift of some kind. This procedure lifts the brow and stretches the sub-brow skin over the bony orbital rim so that there is less fullness in the area and the underlying bony orbital rim is revealed as a highlight in the area which is seen by many as attractive and youthful in appearance. If the sub-brow area is of concern to you, it is important to discuss appropriate surgical methods for its correction.

### **ON THE ROAD TO RECOVERY**

During the recovery process, your mental, physical and emotional systems may return to normal at different times. For the first few days you may feel that mentally you are in a “fog” and need time to sleep a great deal. This is normal following any type of anesthesia and pain medication usage.

Emotional ups and downs are also experienced for four to six weeks. Periods of excitement, satisfaction, elation and well-being alternate with depression, anxiety and concern.

**As you recover, you may find yourself experience a burst of energy and good feeling. You may want to clean out your closet, clean your house or engage in some other strenuous activity. Please resist this impulse since any overexertion may result in further bruising and an increased risk of bleeding.**

### **COPING WITH THE BLUES**

It is not unusual for a patient to develop a case of the “blues” several days after aesthetic surgery. Almost everyone experiences symptoms of mild depression or anxiety during recovery, usually about five days postoperative. You may find yourself short-tempered

or withdrawn, lashing out angrily at family or friends or crying. You will be able to cope with this brief period of emotional turmoil as long as you understand why it happens and what kinds of activities will help alleviate it.

The depression that occurs after cosmetic surgery is similar to postpartum depression following childbirth or the depression one might experience following a graduation. After any period of intense effort and concentration, whether it be preparing for motherhood, completing your education or planning a new, more attractive you, a letdown is natural when the goal is reached and the time has come to move on to the next phase in life.

Five days after your surgery, you may look in the mirror and find a stranger looking back at you. It will be a few weeks or longer before you see the final result of your procedure. Meanwhile, you may be easily fatigued and anxious about your appearance. You can get through this “blue” period by reminding yourself that what you are going through is perfectly normal. Be creative. Think of ways to keep your mind busy and off your temporary appearance. You can probably think of dozens of projects you have been putting off that will fill up your time without tiring you out or requiring you to exert yourself physically.

Be sure to call our office if you are experiencing this blue period and we will be happy to help you get through it.

### **WILL I HAVE SCARS?**

I am frequently asked this question despite careful discussions about the incisions and the resulting scars. Every incision will leave a scar. Fortunately, most of the scars are concealed in anatomic creases and natural lines. The degree of scarring depends greatly on the patient’s healing ability. There is always the possibility of scars spreading or becoming thick and painful. If this happens, the scars may look worrisome or unacceptable. Unfavorable scars usually improve with time, massage and avoidance of sun exposure. You will have to be patient. Scar revision is usually done at approximately one year following surgery if necessary.

### **WE WANT TO HEAR FROM YOU**

If you have questions about any aspect of your care, please call our office. Please remember there is no such thing as a silly question. During business hours, our Office Manager/Patient Counselor or myself will assist you in any way we can.

**If you have an urgent problem or emergency when the office is closed, call the office number (415) 461-1240 and my home at (415) 457-8905 and leave a message with a number where you may be reached.** Our voice mail is frequently checked for messages. If your problem requires immediate emergency attention when I am not immediately available, go to the emergency room at Marin General Hospital for

evaluation. There is a board certified or board eligible plastic surgeon colleague on call for our patients at all times and the emergency room will contact her/him if necessary.

If you anticipate a problem, please call us in the morning so that we can make arrangements to take care of you during the day when help is readily available. **Don't wait until 4:00 p.m. to call for help!**

We will do our best to make your experience as stress-free and pleasant as a surgical experience can be. If you find any aspect of our care not to your satisfaction, please inform us so that we may correct any deficiencies.

Thank you very much for reading this information.

Sincerely,

Roland T. Minami, M.D., D.D.S., F.A.C.S

Elaine Lannert, Office Manager/Patient Counselor

Donna Righetti, R. N., Operating Room Supervisor

James Scheller, M.D., Anesthesiologist