

# FACELIFT/NECKLIFT

## Pre- and Post-Surgical Guide



### BEFORE SURGERY

- If age 50 or over, you need to visit your internist or regular medical doctor for a medical check-up and clearance about two weeks before surgery. Your laboratory testing can be done with your internist as part of your clearance with the results faxed to our office (512-861-6202). If you are having eyelid surgery, have your eyes checked by an ophthalmologist for glaucoma and other eye conditions.
- Stop all medications, vitamins, supplements two weeks before surgery except for medically essential prescription medications (clear these with us). Definitely no Aspirin or anything containing Aspirin, Vitamin E, or Gingko Biloba.
- Fill your after-surgery prescriptions before surgery – pain medication (usually Vicodin or Percocet), antibiotic (usually Keflex or Clindamycin) and blood pressure (Clonidine).
- No smoking (direct or indirect) at least four weeks before surgery – the longer the better.
- No alcohol four days before surgery, especially no red wine.
- Practice blood clot prevention exercises – point/flex your ankle to pump your calf muscles (ballerina style).
- Wash your hair/scalp/face/neck well with shampoo and soap two days before surgery and the evening before surgery.
- Obtain any desired comfort items for after surgery e.g. music, meditation tapes, comfortable clothes, pillows, recliner, anything that will give you more relaxation after surgery. Practice resting with your head elevated – pillow under head/neck/shoulders.
- Obtain soft and liquid food items for after surgery consumption. Have straws available.
- Obtain an electric tooth brush and mouth wash to care for your teeth after surgery.
- Obtain a large, light scarf to conceal your dressing after surgery. A light exercise jacket with hood will also do.
- At 6 PM the evening before surgery, check your blood pressure. If it is less than 110 systolic, place one Clonidine tablet (0.1 mg) under your tongue and let it dissolve. Do the same with your second Clonidine tablet at 6 AM the morning of surgery, again without water.
- Be well nourished, hydrated and rested before your surgery. Be in bed no later than 9 PM the night before. If you anticipate being very nervous, ask us for a mild sedative prescription when you receive your other prescriptions before surgery. Any cold or other illness symptoms will cause us to reschedule your surgery.
- Do not eat or drink anything after midnight the evening before surgery and nothing for breakfast the morning of surgery.
- Leave valuables at home – only bring essentials.
- No makeup the morning of surgery. Avoid nail polish. No earrings or other piercings. No contact lenses.

**Dr. Christine Fisher**  
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**Phone: (512) 815-0123**  
Fax: (512) 861-6206  
After hours: (512) 323-5465

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- Wear extra comfortable, loose fitting clothes and flat shoes. Avoid shirts that require you to raise your arms above shoulder level.
- Plan on arriving at the hospital about 1-2 hours before scheduled start time.
- Bring some magazines to leaf through before your surgery gets started.
- Pre-schedule your first and second after-surgery visits with us so your family/friends can plan their schedules.
- Have a friend or family member drive you to surgery and drive you home. They should stay with you for the first 24 hours after surgery.

## AFTER SURGERY

- Rest in bed with your head elevated at about 45 degrees, pillow under your head, neck and shoulders. The neck should be straight and relaxed - no flexion or extension. No chin to chest positioning.
- Get up, with assistance, every few hours, walk a little, use the bathroom, then back to resting.
- While in bed, point/flex your ankles to promote good circulation and avoid blood clots in your legs.
- Minimize talking or facial expressions.
- Leave your dressing alone. Have your private duty nurse or other responsible adult empty your drain as needed.
- No cold or hot compresses on your face.
- Do not turn your head abruptly. Keep your head quiet. Turn your whole body if you need to turn.
- No bending forward or down at any time. **Never lower your head.** If something falls on the floor, do not pick it up.
- If your eyelids had surgery, place cold saline or water compresses on your eyes for the first 12-24 hours after surgery – 4inch by 4inch sterile gauze and sterile saline kept in the refrigerator is a good way. Use eye drops as instructed: Tobradex – one drop each eye, morning and evening. Use artificial tears as needed. Apply Tobradex ophthalmic ointment to eyelid sutures once a day.
- If you had a chemical peel around your mouth, apply ointments as directed three times per day. Avoid sun exposure and do not pick at the flaky skin as that will cause scars.
- Eat 3 meals a day - liquid or soft foods in the first few days to avoid chewing.
- Drink plenty non-carbonated drinks: water and juices.
- Take your antibiotic with or after food (usually Keflex or Clindamycin) every 12 hours for one week.
- Use pain medication only as needed to function, no more than every 4 hours, again with food. Switch to Tylenol as soon as possible.
- Plan to come to the office the day after your surgery for drain removal and dressing change. Next office visit will be about 2 or 3 days later.

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- You may shower/shampoo on the second day after surgery. You may use conditioner. Use comfortably warm, not hot water. Don't let the shower beam hit your face ever. Let the water hit the back of your head. Let the hair air dry or with a cold hair dryer – never hot. Use your fingers or a large comb for combing. It usually takes several shampoos to get all the snags out – be patient. From then on, you can shower/shampoo every day.
- Suture removal in the office will start 4 or 5 days after surgery and be completed by 7 or 8 days.
- Makeup is OK after about a week. Until then, don't manipulate your face.
- Males can shave carefully with an electric shaver after one week.
- No hair dyeing or other chemical treatment for one month.

## THINGS TO EXPECT

- You most likely will have nausea the afternoon/evening after surgery. This may persist despite all anti-nausea medications (Zofran, Compazine) until you resume some nutritional intake to absorb your stomach's acid (crackers, bland bread, thin chicken soup and similar foods).
- The first 48 hours are hard for everyone – “no pain, no gain”, but will be forgotten soon when you are enjoying your rejuvenated look.
- Your face and neck will feel uncomfortably tight and stiff during the first week.
- You may feel that your neck is so tight that you can't swallow – but you can.
- Your ears will swell and may throb.
- Your throat may be sore for a day or two – lozenges may provide some soothing.
- Bruising and swelling is variable. Both subside over two to three weeks.
- Redness for weeks in the area of the chemical peel is normal. Avoid sun exposure and wear sunblock. Do not pick at scabs/flakes as this will cause scars.
- Numbness in the face and neck is expected over the next 3 to 6 months.

## RESTRICTIONS

- No exercise or any exertional activity which could increase your heart rate or blood pressure for four weeks.
- No driving for about a week.
- No flying for ten days.
- No earrings for two weeks.
- No direct sun exposure for six weeks – use a protective hat and a gentle skin sunblock with Zinc and Titanium.
- No facial manipulation for six weeks (facials, peels, injections, Botox, or other).
- No dental work for four weeks (unless there is an emergency).
- No hair coloring or perms for six weeks.
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### EMERGENCIES

\*\* After hours, call Medlink Paging Service at (512) 323-5465

- Any signs of infection, call Doctor IMMEDIATELY
  - Temperature greater than 101.00 degrees
  - Significant swelling
  - Tender, red, swollen, warm areas, pus, yellow or green drainage
  - Swollen/painful or darkened/blackened skin

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