



Plastic Surgery by Bram Kaufman, MD, FACS

Experience & Compassion

216-778-4450 Office
216-778-7800 After Hours

Post-Operative Instructions for Rhinoplasty

DIET:

Most people can resume a normal diet the evening of surgery. If you feel queasy or nauseated, start with clear liquids or soup. Advance your diet as tolerated to a regular diet. You may experience some constipation as a result of the pain medication. I recommend a trial of over the counter laxatives such as Milk of Magnesia. If this is not sufficient, then a dulcolax tab or suppository may be necessary.

ACTIVITY:

On the day of surgery and for 2 days after, please avoid exertion, straining, bending or lifting. I encourage you to be modestly active after the first few post-operative days. Walking short distances is perfect. Avoid exercise until we discuss it at your first post op visit.

Elevating your head by resting or sleeping in a recliner or on several pillows in bed will help decrease swelling and discomfort.

WOUND CARE:

Expect bloody drainage from the nostrils for the first 24 hours. Change the gauze below the nose as needed, at first it might be as often as hourly. You may clean the nostrils of scabs and blood with a gauze or Q-tip moistened with water and/or peroxide. If needed, soften the scabs first by applying a moist gauze for 15 minutes.

You may notice **considerable** swelling and bruising beneath the eyes, of the upper eyelids and occasionally in the forehead region. This is quite normal.

If you have external or internal splints please leave these in place. If the splint falls off before your appointment, gently reapply it and secure with some tape.

BATHING:

It is fine to bathe when you feel well. Keep the nasal splint and dressings dry

PAIN CONTROL:

Take the narcotic pain medicine as needed. In two days you will probably be able to substitute tylenol every 6-8 hours as needed. (**Do not** take the Tylenol with the Percocet, both have acetaminophen). Please do not drive until you are no longer taking the narcotic and are free of significant pain.

EMERGENCIES:

If there is a problem, please call me, my office or the resident on call. Most issues are easily addressed and do not require significant intervention.

The most common emergencies that might need attention are:

- Sudden increase in pain
- Nausea that lasts 4 hours or more and does not respond to medication
- Bleeding that is profuse and uncontrolled
- High fever lasting more than a few hours and not responding to medication
- Shortness of breath or chest pain
- Leg swelling
- Loss of consciousness

If you feel the situation is urgent, call 911 and/or proceed directly to the closest emergency room. Please call us as well.

FOLLOW-UP:

Follow-up is typically in 5-7 days and should be scheduled by calling Dr. Kaufman's office at 216-778-4450 if it has not already been arranged.

Bram R. Kaufman, MD
Assistant Professor of Plastic Surgery
Metrohealth Medical Center
Case Western Reserve University

Phone: 216-778-4450
Evening: 216-778-7800