



Blepharoplasty

After Surgery -

Immediately After Surgery:

- Follow-up visits ARE IMPORTANT! Please follow your physician's follow-up instructions.
- Start walking as soon as possible, as this helps reduce swelling and lowers the chance of blood clots. Only walking is permitted for the first 2 weeks after surgery. Your provider will discuss what activities you can resume at your 2-week post-operative appointment.
- Good nutrition and fluid intake is essential to wound healing. Eat well-balanced meals and drink plenty of fluids. If your appetite is decreased post-operatively, protein shakes can be helpful.
- It is normal to experience swings in emotions/moods over the first few weeks after surgery as healing is stressful, both physically and emotionally. Be aware that narcotic pain medication can impact your emotional state as well.
- Please do not take your medication(s) on an empty stomach as this can cause dizziness and nausea. In addition, pain medications tend to cause constipation and we recommend the use of over-the-counter laxatives or stool softeners (Colace) post-operatively while you are on pain medications. Take pain medications as directed and refer to the attached "Pain Management" handout for more detailed instructions.
- It is very important to keep your head always elevated above your heart for the first 1-2 weeks. This will decrease the swelling and risk of bleeding which, in turn, will decrease your recovery time. This means sleeping on a few pillows or even in a recliner for the first week. Do not bend over to tie your shoes or pick something up off the floor – use your knees.
- Ice for 15-20 minutes every hour or two while you are awake. Ice to the eyes is very beneficial for the first 48-72 hours. A bag of frozen peas wrapped in a thin towel works well. They are light, they will conform to the shape, and will thaw after 15 minutes of use. You can also place them back in the freezer and they will be ready to use again in an hour.



- If you had a lower blepharoplasty, you may have frost sutures. In the case you do, the suture is taped to your forehead to support your lower lid and may feel unusual. You can blink normal but try not to fight the upwards tension.
- Keep the steri-strips clean, dry, and intact. If you have sutures that need to be removed, this will be done 5-7 days after your surgery.
- No smoking or use of nicotine-containing products for 4 weeks after surgery.
- *REMEMBER: same-day surgery does not mean same-day recovery. Healing is a gradual process. It is normal to be impatient and feel discouraged while waiting for the swelling, bruising, and discomfort to diminish. PLEASE BE PATIENT! Extra rest, a nutritious diet, and avoiding stress are important aides to your recovery.

48-Hours After Surgery:

- You may shower 24 – 48 hours after surgery. You will be further instructed on cleansing at your first post-op appointment. No bathing, swimming, or hot tubs for the first 4 weeks unless your provider advises otherwise. Keep incisions clean/dry and inspect daily for signs of infection.
- You may resume driving when you are no longer taking pain medication and you feel comfortable enough to do so.

2 Weeks After Surgery:

- No lifting greater than 8 lbs. for 2 weeks after your surgery.
- Strenuous exercise and activities are restricted for 2 weeks after your surgery.

What to Expect -

- You may experience temporary pain, soreness, numbness, and incision discomfort. The maximum discomfort will occur within the first few days after your surgery.
- You will have bruising and swelling. The majority of the bruising and swelling will subside within 2 – 4 weeks but can last as long as 3 months after your surgery.
- You may feel tired and fatigued so get plenty of rest.



- You will walk slightly bent forward and gradually return to normal posture as you begin to heal.

When to Call -

- If you feel the eye itself is irritated or painful.
- If you are experiencing increased swelling or bruising.
- If you are experiencing increased redness along the incision.
- If you are experiencing severe or increased pain not relieved by medication.
- If you are experiencing any side effects from medications such as a rash, nausea, headache, or vomiting.
- If you are experiencing an oral temperature over 101 degrees.
- If you are experiencing any yellowish or greenish drainage from the incisions or notice a foul odor.
- If you are experiencing bleeding from your incision(s) that is difficult to control with light pressure.

Do not hesitate to call and speak with our medical staff with questions or concerns!

****IN A TRUE EMERGENCY, PLEASE CALL 9-1-1 IMMEDIATELY****

Pain Management -

After any surgical procedure, the management of pain is an important portion of your care. We know that pain is inevitable; in order to keep it at a tolerable level we will use a combination of medications to maximize your pain relief while keeping in mind your overall health and safety. Narcotic pain medications may be a portion of your pain management strategy, but we do try to wean all patients off these as quickly as possible to limit the risk of side effects as well as addiction.

NSAIDs:

- Do **NOT** take ibuprofen (Advil), naproxen (Aleve), aspirin or other NSAIDs in the 2 weeks prior to surgery or **3** days after surgery, as it may cause intra-operative or postoperative bleeding complications.



- It is **SAFE** to take acetaminophen (Tylenol) every 6 hours for the first 2 days, then you may decrease if you are not having pain.
- Please maximize acetaminophen (Tylenol). Narcotics used in conjunction with acetaminophen are more effective- so do not just jump to the narcotics, please take the acetaminophen.
 - For adults this is typically 2 tablets every 6 hours of either regular or extra strength Tylenol. Do not exceed the daily maximum which is 4000mg in a 24-hour period.
 - Plan on taking Tylenol every 6 hours for the first 2 days, then decrease if you are not having pain.
- Three days after surgery you may begin taking ibuprofen or naproxen if you have not had excessive bruising or postoperative bleeding. If you do not know if this is you, feel free to call our medical staff.
 - Ibuprofen dosing is three 200mg tablets every 6 hours (600mg total per dose). Do not exceed the daily maximum which is 3200mg in a 24-hour period.
 - This may be alternated with Tylenol so that you have one non-narcotic option available every three hours.
 - Ex: 12:00 Tylenol, 3:00 Ibuprofen, 6:00 Tylenol, 9:00 Ibuprofen etc.

This combination is very effective and often allows patients to stop taking their narcotics around the three-day time period.

Narcotics:

These may be prescribed for you; these are safe to begin after surgery and the instructions will be written on the bottle.

- Please be mindful that these can cause constipation, disorganized sleep, forgetfulness, and respiratory depression. Do not increase your dose without discussing it with your physician.
- Please wean yourself off these as early as reasonable. If you are having difficulty decreasing your narcotic use, make sure you are maximizing the non-narcotic options listed above and begin to stretch the time between dosing again until you have successfully stopped taking narcotics.



- It is important to get up, move around and take deep breaths after surgery to prevent other complications like DVT/PE (blood clots) or pneumonia, so take narcotics as needed to allow for ambulation and showering.

Gabapentin:

This is a non-narcotic medication that can be used to help with “nerve” pain. It must be taken on a scheduled basis, as a steady level must be kept in your system for the best function. It is not effective taken on an “as-needed” basis, and you will need to taper off this medication when ready to stop.

Muscle relaxants:

These are used with some procedures where the muscles are involved. The two common options are Valium and Flexeril. These may be taken in conjunction with your other medications, as prescribed. Combining narcotic pain medication with muscle relaxants will increase drowsiness. Please make sure you notify your provider of any other anti-anxiety medication you may be taking, as they can overlap with these muscle relaxants.

Non-medication options:

- **Warm showers** can be taken to aid pain and stiffness. Getting in the shower and slowly raising your arms and moving your body can help loosen your joints and muscles that tend to tighten when you are not as active as usual. Typically, you may shower 2 days after surgery (even with drains) and your incisions can get wet. Do not soak incisions in a bath or hot tub for at least 4 weeks after surgery.
- **Ice packs** are valuable to limit swelling in the first 24-48 hours. Use these for no more than 20 minutes per hour. If you have numbness in a surgical area (ex: after abdominoplasty or breast reconstruction) be careful with ice as you may get frostbite at a lower temperature, so please do **NOT** use it in areas with numbness.



- **Heating pads** or warm packs may also be comforting but should ***NOT be used on numb areas*** as your skin may blister even on low settings. Typically, these are held until 48 hours after your procedure when the early swelling has stopped, and they can be more helpful.

Handling prescription narcotics:

- Narcotics should always be kept in a locked cabinet if possible. If you do not have a place to lock them away, at least store them high and hidden from children or visitors.
- When you have finished using your prescription medications, it is always wise to dispose of them safely. This may mean asking if your pharmacy, local fire station, or police station will accept narcotic prescriptions for disposal.

If you have any questions or concerns regarding your postoperative journey, please do not hesitate to call our office at (503) 292-9200 and speak with our medical staff.