BUCCAL FAT EXCISION

(Cheek fat pad removal)

GENERAL INFORMATION

Buccal fat excision from an intraoral approach, either alone or in combination with submental liposuction is an excellent corrective technique for patients with disproportionate facial fullness. Procedure is designed to slim and contour the face.

THE ANESTHESIA

Buccal fat excision surgery is performed under a "light" general anesthetic (patient is asleep). This technique provides excellent operating conditions while affording maximal patient comfort and safety. The anesthetic is administered by a board certified doctor anesthesiologist who remains in attendance throughout the operation. All of the required monitoring, anesthetic delivery and emergency equipment are present at all times. Further information, including any questions you may have, will be explained and discussed fully by our anesthesiologist prior to your surgery.

PRE-OPERATIVE PREPARATIONS

You must be in good health to undergo any elective cosmetic surgery. A physical examination and routine lab work will need to be performed by your own primary physician. If you do not have a primary doctor, we can refer you to local doctors in our area. We do not provide these services. It will be required that all this pre-op paperwork is <u>in our office 1-2 weeks prior</u> to surgery.

It is very important that our office is aware of any medical conditions <u>and</u> all medications you are taking.

It is imperative that you not smoke 2 weeks prior to surgery, and 2 weeks after surgery. This would impede your healing greatly. Talk to us about options.

It is a required that someone drive you home upon your discharge. Also arrange for transportation to and from our office for your post-operative appointments until your doctor gives you permission to drive.

<u>DO NOT</u> take aspirin or aspirin-containing products for 2 weeks prior to surgery and for 2 weeks after surgery.

An adequate diet with vitamin supplements, especially Vitamin C, is recommended. You should be in the best nutritional state possible prior to surgery.

If you will be preparing your own meals at home after surgery, have on hand easy to prepare foods. A soft diet, such as mashed potatoes, yogurt, applesauce, soups, Jell-O are helpful the first 24-48 hours after surgery.

THE SURGICAL PROCEDURE

Excision of Buccal fat is rapidly and safely accomplished through a half- inch incision inside the mouth, where the upper gum meets the cheek. The operation should be absolutely bloodless, and usually takes less than one hour. The incisions are closed with dissolving sutures. There are no visible stitches.

POSSIBLE COMPLICATIONS

Asymmetry-

Nerve Damage-

Sunken appearance over time-

WHAT TO EXPECT AFTER SURGERY

DRESSING- A chin strap with foam padding will be worn immediately after surgery.

SWELLING- during the first two days is normal, usually minimal, and will subside.

DISCOMFORT- pain medication is prescribed should always be taken with food.

POST OPERATIVE CARE

Wearing the chinstrap with foam padding is required for the first 72 hrs, and then you may shower, and discard the padding. Continue wearing chinstrap for an additional week, or as advised by Dr. Moelleken.

It is important to <u>sleep on your back, with your head elevated</u>. This will reduce some swelling.

AS WITH ANY FACIAL SURGERY, AVOID BENDING FORWARD, AS THIS CREATES STRAIN ON ALL INCISIONS THAT ARE HEALING.

Eat easy to chew foods (soft foods) for the first couple of days.

Avoid excess taking, as this may cause discomfort.

Rinse carefully with salt-water after every meal.

Any dissolving stitches that remain may be clipped after 4-5 days.

RESUMPTION OF PHYSICAL ACTIVITIES

GENERAL RULES OF THUMB

TWO, FOUR, SIX RULE

FIRST WEEK- TAKE IT EASY!!! PATIENTS WHO ARE TOO VIGOROUS FREQUENTLY DEVELOP COMPLICATIONS!

At two weeks- take long walks on a flat surface. No other kind of workouts. Any activity that would raise your blood pressure would compromise the healing incisions and newly developing blood supply.

At four weeks- light exercise such as aerobics, but no weight training. Start light. For example, if you normally do 30 minutes on a treadmill, begin with 15 minutes, then increase as your body gets used to things.

At six weeks- resume all previous activities with clearance from Dr. Moelleken.