

Brent Moelleken, MD, FACS
Plastic and Reconstructive Surgery

Board Certified, American Board of Plastic Surgery
Associate Clinical Professor, Plastic Surgery UCLA

What to Know After Your Surgery

1. **EMERGENCIES-** Blood clots are very rare, but if you notice a 'Charley horse' in one or both of the calves, any shortness of breath, or unilateral swelling of the leg of calf, you should be seen in an emergency room, preferably one affiliated with your local university. Excessive bleeding should be reported immediately to Dr. Moelleken. Oozing after liposuction, or from eyelid surgery is common and not serious unless the bleeding does not cease with light pressure.

Severe abdominal pain, shortness of breath, high fevers, redness or pain around any incision, excessive light headedness after surgery may be serious. If you are unsure if something is an emergency, call the office immediately or seek help at an emergency room. Again, don't delay when you feel something is wrong. Better safe than sorry!

2. **Pain Medication and Nausea** - The board certified anesthesiologist uses medications that are designed to avoid nausea after gynecomastia surgery. However, some patients may still experience this, especially patients prone to motion sickness. If nausea occurs, take the Zofran tablet immediately.
3. **Patients in recovery.** - For patients in recovery from alcohol or pain medication dependency, we are acutely aware of the danger of relapse. Pain medication is necessary in many cases for postoperative treatments, and we have guided many patients successfully through the postoperative period with help from their sponsors.
4. The most common source of nausea is narcotic pain medications. Some antibiotics can cause nausea as well. Be sure to take these medications with food, and try to wean off the narcotic pain medication by the second postoperative day. At that time. Most patients can segue to alternating Tylenol and Advil / Motrin.
5. **Activity** - Immediately following surgery you will want to rest. Once you feel up to it get something light to eat and take medications as instructed. During the day and evening, you should get up and walk around frequently

to prevent blood clots. Avoid lifting anything heavier than 5 pounds, lifting children, or intimacy for about two weeks.

6. **Hydration** – Make sure you drink a lot of fluids during your recovery period. It's also a good idea to flex and extend your feet frequently to 'manually pump' the blood, further avoiding blood clots.
7. **Constipation** – This is common when patients are postoperative, especially if they required prolonged pain medication with narcotics. The sooner patients get on Advil / Tylenol alternating, the better! Also normal constipation medications are usually fine.
8. **Sleep** - After many surgeries on the face or chest, it is important to rest and sleep at a 30-degree angle on your back for several days. Continue to do so until you feel comfortable sleeping the way you normally do. This will vary from patient to patient. Important - Anesthesia may make it very difficult to get to sleep the night after surgery. In order to maintain your normal sleep schedule, we recommend taking an Ambien for the first few nights. It is very common that despite Ambien, patients have a restless night the first several nights after surgery.
9. **Garment/bandage** - Leave all bandages and binders wrapped around your chest. After that, many patients find it more comfortable to adjust the garment/bandage slightly. The garment should be snug but not constricting, in order to give gentle compression. In general, if you cannot put your finger in between the garment and your body, it means it is too tight. If the garment is too tight it will prevent proper blood flow. Try not to disturb the gauzes and bandages below the garment until you are given the all-clear to shower. Oozing from the incisions is common, but if you see actual bleeding, or unilateral swelling, please call the office. Dr. Moelleken or his assistant will generally remove the bandages at your first post-operative visit. He will advise whether or not to continue using gauze or pads on the incisions.
10. **Post-operative garment/shirt** - At day 2 or 3 the incisions should no longer ooze. At this time you may switch to placing your garment on rather than the binder. An ABD pad can cushion sensitive areas.
11. **Shower** – Don't shower until you are given the all-clear. If you must bathe, take a sponge bath and avoid getting water on the bandages. After your first visit, Dr. Moelleken or his assistant will remove some of the bandages and check your surgery area. Once you arrive back home it is fine to shower. Be careful as it is not uncommon to be dizzy. Simply remove the garment, rest for a bit, and take a warm but not hot shower. Allow the water to drizzle down over your surgery area. Avoid long showers or direct, forceful streams of water. It is OK for the surgical tape (steri strips)

on the incisions to get wet. Afterwards, pat dry and put your garment/bandage back on. No baths for the first 2 weeks or as long as the incisions are still open.

12. **Ice** - You may apply ice packs or gel packs to the surgical area for the first 2 days. Do not apply directly to skin. The area will be numb following surgery, so you may not feel the cold from the ice, which could result in frost-burning the skin.
13. **Incision care** - The sutures Dr. Moelleken uses will dissolve on their own. Occasionally for surgery on the face, there are some sutures that will need to be removed. This typically occurs in 7-10 days after the procedure. You will generally have Steri strips over the incisions to promote optimal healing. We will change the surgical tape on the incisions at about 7-14 days. If the strips begin to curl at the edges, you can trim them. If they fall off entirely, you should be OK until your next visit.
14. **Driving** - Do not drive for the first three days, while on pain medications, or if you feel impaired or incapable of driving in any way.
15. **Blood thinners** - Do not use aspirin-containing products for at least two days after the surgery, and then only after clearing this with Dr. Moelleken. Patients with stents or requiring aspirin for various reasons may have special instructions.
16. **Exercise** - Generally, patients can walk a slow mile by one week, several miles by two weeks, and start easy exercise by 4 weeks, and more vigorous exercise by 6-8 weeks. Let your body be the guide, as not all patients are ready for exercise at these milestones.
17. **Work** - Typically, you can go back to desk work within 3-12 days following surgery. Physical jobs could take anywhere from 1-2 weeks. Often, patients with physical jobs will modify their job. The time you need off work will depend on many factors, such as age, general health, type of work requirements, acceptable appearance, and the always variable speed of recovery: everyone heals at a different rate. We can typically provide a letter stating you will need a certain amount of time off from your job. The letter will not state the procedure you had unless you tell us specifically. You can also inquire about going on short-term disability through the State.
18. **Sun exposure** - Avoid direct sun exposure on the incisions for at least 6 weeks. After 6 weeks, apply sunscreen (at least SPF 50) to the incision area. In an ideal world, it's best to avoid the sun completely for up to 6 months.

19. Silicone sheeting, various ointments and laser or other wound healing treatments may decidedly help your incisions. These services are provided through our office at additional cost.
20. **Smoking** - Do not smoke for at least 4 weeks after surgery. Smoking can greatly compromise, and sometimes ruin, healing. This includes vaping and marijuana. Hopefully the time off cigarettes will be sufficient to quit for good! Remember, just 'that one cigarette' will likely lead to a relapse.
21. **Medications** - Be sure to take all medications as directed. If you develop a reaction to any of the medications, please stop taking it and call our office so we can prescribe an alternative.
22. **Bruising** - If bruising occurs, you can apply Arnica or Traumeel cream to help them fade more quickly. We have certain lights in the office that may help the degradation of blood breakdown products. Avoid applying the creama directly on the incisions. Bruising typically abates from 1-4 weeks, depending on the procedure performed and the individual patient.

Long term recovery

Early after surgery

Many patients notice encouraging and rapid recovery for the first two weeks after surgery. Nevertheless, the early results do NOT indicate your final result. You must be patient, as final results don't occur typically for six to twelve months, and longer for revisional or technically complex surgeries. Often, minor course corrections, corrective measures or just more time are required before the patient sees their final result. Frequent walks prevent collapse of small segments of the lungs, called atelectasis. Fevers after two days should be reported to the office.

The Blues

Many patients may experience depression or decreased energy levels for several weeks. The sooner you return to your daily routine, the sooner these dysphoric feelings tend to dissipate. Patients who are prone to depression may (or may not) have feelings of depression that may warrant consultation with their psychologist or psychiatrist.

It is the surgical areas to be swollen and tender. If the swelling is unilateral and tense, please consult with Dr. Moelleken. Asymmetry is very common initially, and it subsides with time.

Nerve Sensations, Throbbing and Itching

These sensations are common and tend to dissipate over time. Hypersensitivity and numbness are both common after surgery. If these sensations increase in severity or do not get better, please advise us and we can help with desensitization exercises, massage, creams, etc. Some patients are quite happy with the services provided by lymphatic massage professionals. However, do not massage vigorously within several weeks of the surgery, or bleeding (hematoma) or increased swelling can result.

How to contact us

Please call the office during regular business hours @ 310-273-1001, after-hours email Dr. Moelleken drbrent@drbrent.com. If you feel you have a problem do not hesitate to contact us. If you have a medical emergency, please go to the ER to be evaluated.