



## What To Expect Following Mastopexy (Breast Lift) Surgery

**This Document explains Dr. Cooper's specific Instructions for Pre and Post-Operative Care. We require that these Instructions, Dr. Cooper and our Office Staff are the only resources for your Pre and Post Operative Care Instructions. The Internet, other Physicians, Family Members and Friends are not resources for information and instructions for Pre and Post Operative Care. Please review these Instructions prior to contacting our office with questions and please do not contact our office to ask about instructions or recommendations given by any other source.**

### Post Operative Swelling & Care

- Maximal swelling is 2 to 3 days following surgery. You may have some bruising; this is normal.
- You can take Advil, Motrin or Ibuprofen 24 hours after your surgery
- You can start Tylenol right away. Do not take with Narcotic as they both contain acetaminophen. Space apart at least 4 hours. Total daily dose of Acetaminophen should not exceed 4000 mg/day.
- You should take a stool softener such as Colace as directed by the packaging while taking narcotic pain medications (Percocet, Oxycodone, Vicodin). **DO NOT take a laxative.**
- Wear your compression stockings overnight after your surgery and then throw them away the next day.
- Wear your sports bra or surgical bra for 6 weeks at all times. You may remove it to shower.
- Do not submerge in water for 1 month; no baths or any swimming, etc
- Ice can be applied in 15 minute intervals to decrease swelling for the first 3 days but it will not eliminate swelling entirely.
- If you have drains they will most likely be removed when they are putting out less than 30ccs in a 24 hour period. It is important not to remove your drains too early to avoid seromas.
- Most of your sutures are absorbable but depending on your individual procedure there may be some sutures which need to be removed in 1 to 2 weeks following surgery
- You will likely have Steri-Strips (small band aids) over your incisions. Please leave them in place, as they will fall off on their own in about 7-14 days. You may remove them if they remain in place after 14 days.

### Diet Following Surgery

- Start with bland food/ drink; if tolerated return to regular diet. Avoid acidic food/drink for 24 hours
- Drink plenty of fluids for the next 24 hours to help flush anesthesia out.

### Activity Following Surgery

- For the first 24 hours after surgery only get up for meals and to use the bathroom. After 24 hours you can shower and be Up as Desired
- No heavy lifting (greater than 10 pounds) or bending over or strenuous activity for a period of 6 weeks.
- In order to prevent blood clots it is important for you to walk around at home a few times a day.
- Please avoid any activity that raises your heart rate or causes you to break a sweat until you have been cleared to resume your normal activities.
- Do not drive until the later of 3 days or until you have stopped taking pain medication.
- Rest and take naps as needed throughout the day. You may feel tired the first few weeks after surgery.

### Personal Care Following Surgery

- You can shower the day following surgery
- No baths or swimming (do not submerge in water)
- Do not apply any lotions or ointments to the site of your incision

### Call the Office at (561) 406-6574 if you have any of the following:

- A fever greater than 101°F, a fluid bulge underneath your skin, darkness or discoloration on or around your nipple, chills, nausea, vomiting, shortness of breath, leg pain, increased incisional pain not relieved with pain medication; if you notice signs of wound infection (redness/tenderness at or puss discharge from your incision); or if you have other concerns.

- Please call 911 or go to the closest hospital Emergency Room for any life threatening emergencies.

**Your Follow Up Visits:**

- 3 days following surgery if drains/ or 1 week following surgery      \_\_\_/\_\_\_/\_\_\_    \_\_:\_\_\_\_\_ (AM / PM)
- 2 weeks following surgery      \_\_\_/\_\_\_/\_\_\_    \_\_:\_\_\_\_\_ (AM / PM)
- 6 weeks following surgery      \_\_\_/\_\_\_/\_\_\_    \_\_:\_\_\_\_\_ (AM / PM)
- 3 months following surgery      \_\_\_/\_\_\_/\_\_\_    \_\_:\_\_\_\_\_ (AM / PM)

Date \_\_\_\_\_ Time \_\_\_\_\_ AM/PM X\_\_\_\_\_

Signature (Patient/Health Care Agent/Guardian/Family Member) (If patient's consent cannot be obtained, indicate reason above.)