

BLEPHAROPLASTY (EYELID SURGERY) INSTRUCTIONS

What Can I Expect After Surgery?

There will be a mild to moderate amount of pain and discomfort associated with the surgery. This should be easily controlled with oral medications. Tylenol with codeine (or equivalent if allergy to codeine exists) is generally sufficient for pain control. The discomfort and pain should begin to decrease within 48 hours after surgery and a significant increase in pain after this period should prompt you to call the office. Bruising and swelling are not unusual after the surgery. These symptoms may worsen on the second day; this is normal.

Tearing and sensitivity to light is common after surgery, but this usually lasts for just a short while. Sunglasses may be worn (unless a rhinoplasty has been performed as part of your surgery).

It is of utmost importance to tell Dr. Verret ahead of time if you have ever been on Accutane, received radiation therapy to the head or neck, or taken steroids or immunosuppressive agents. Immunosuppressed patients (HIV positive, chemotherapy, diabetes, etc.) and patients with certain autoimmune disorders may not be good candidates for this procedure as the risks of poor healing and infection leading to permanent scarring and poor esthetic results may be much higher. It is mandatory that you inform Dr. Verret if you have any of these conditions before surgery.

Things To Remember

- Make arrangements to have someone drive you to, and from, your surgery. You will likely need someone to assist you in driving for at least a week after surgery.
- If you live more than 30 miles from our office, you should plan on staying in Plano with friends, family or in a hotel for 2-3 days following surgery.
- Arrive for your surgery in loose, comfortable clothing. Your top should button or zip rather than pull over your head.
- Having someone stay with you on at least the first night after your surgery is highly recommended.
- Be sure to fill your prescriptions before your surgery since it means one less thing for you to worry about afterwards. Take the vitamins and antibiotics until your supply is exhausted; the prescriptions need not be refilled.
- If you are a smoker, you should not smoke for at least 2 weeks prior to surgery and 2 weeks after surgery. Smoking and chewing tobacco inhibit your circulation and can significantly compromise your surgical outcome.
- Do not take any aspirin or any anti-inflammatory compounds for 2 weeks before and 2 weeks after your surgery unless you first discuss it with your surgeon.



- Sleep with your head elevated 40 degrees for two weeks; an additional pillow or two under your mattress may help, if necessary.
- Apply iced compresses made of washcloths (not an ice bag) to your eyes as much as possible during the first three days after surgery.
- Stay up (sitting, standing, walking around) as much as possible after you return home - this promotes a decrease in facial swelling. Of course, you should rest when you tire.
- Avoid bending or lifting heavy things for one week. Besides aggravating swelling, this may raise your blood pressure and start bleeding. No lifting over 5 pounds the first week, 25 pounds the second week.
- Avoid straining at stool, which also raises your blood pressure. If you feel you need a laxative, consult your local pharmacist as most stool softeners do not require a prescription.
- Avoid hitting and bumping your face and eyes. It is wise not to pick up small children, and you should sleep alone for one or two weeks after your operation. Remember, the two most common causes of accidental injury are children and animals.
- Avoid sunning the face for 1 year. Whenever you go out in the sun, use at least an SPF 15 sunscreen.
- Don't tweeze your eyebrows for two weeks.
- You may have your hair washed at a salon or wash it gently yourself 24 hours after your surgery. Do not use the usual heat type hair dryer; use the cap type or blow dryer set on cool setting.
- Go over your suture lines 2 to 3 times a day with hydrogen peroxide on a Q-Tip, but avoid getting any in your eyes. Then put a very small amount of Lacrilube on a Q-Tip and apply it to suture lines at the outer corners of the eyes.
- Take only prescribed medication or Tylenol, never aspirin or other NSAIDS, as they promote bleeding.
- Report any excessive bleeding that persists after holding pressure for 15-20 minutes.
- Some crusting may appear around your eyes after the first 24 hours. Warm, clean compresses applied to the area several times a day will help alleviate the crusting.
- If your eyes are dry after surgery, you may use artificial tear drops (available in drug stores) to help soothe them during the day. Your surgeon may prescribe a lubricating ointment to put into your eyes at bedtime. It is not unusual for this ointment to briefly blur your vision when it is first applied, but this is temporary.
- Usually, Dr. Verret will use dissolvable sutures, which will disappear on their own within 5 to 7 days. External sutures should be kept clean and dry. If non-dissolvable sutures are used, they should be removed within 5 to 7 days after surgery.
- You may shower or bathe the day after surgery, but do not let the spray directly strike the area of your eyes. Do not rub, wash or massage your eyelids. Do not be afraid to get the sutures lines or sutures wet.
- Do not wear any eye make-up until after you are examined and told it is all right to do so. Do not wear contact lenses for the first 5 days after surgery. Contact lenses may be worn after this time if there is no significant eye irritation present, and if the incisions are healing well.
- Don't go swimming, diving, water skiing, or participate in strenuous athletic activity for at least one month after surgery.



- Do not apply hair coloring until three weeks have elapsed following your operation.
- You may wear a wig or hairpiece as soon as you desire.
- Eye shadow and false eyelashes should not be applied until 10 days after surgery.
- You can camouflage the discoloration about the eyes with a cover stick cosmetic (two shades darker than your skin color) before you come to the office to get your first set of sutures removed. Bring it near the line of the incision but do not apply over the incisions themselves until several days after the sutures have been removed. The following application technique seems best: First, smear a layer over the entire discolored area, then apply more with a “pattern” motion; finally, blend the edges with the surrounding skin.
- You should probably not plan to return to work until four or five days have elapsed following the surgery, or perhaps, one week. Even then, it might be wise to procure sunshades with large frames unless you don’t mind becoming the center of attention. You’ll have to play this by ear.

Contact the Office Immediately

If you notice any of the following, please contact the office immediately at 972-608-0100:

- any change in vision.
- unusual bleeding or discharge from the incision.
- development of a temperature elevation exceeding 100.0 degrees.
- a significant progressive increase in pain which is not easily relieved by taking your prescribed medication.

If any of the above should occur after regular office hours, do not hesitate to call Dr. Verret at home at the number provided on the day of surgery or on his cell phone. For whatever reason, if you notice one of the above changes and cannot reach us at our office or through any of the alternate means, present yourself to the emergency department for evaluation.

Recovery Timetable

- **Day 1** Return Home. Use cool compresses for 24 Hours. Mild swelling and bruising, mild discomfort.
- **Days 2-3** Maximum bruising and swelling, some crusting on eyelashes. Use warm compresses for crusting.
- **Days 5-7** Stitches removed or dissolving. Bruising going away.
- **Weeks 1-4** Eyes mildly irritated or teary.



Remember

If you have any questions at any time, do not hesitate to call. On the day of surgery, you will be provided with Dr. Verret's home and cellular phone numbers as well as the personal contact phone numbers of members of our staff. We do not like surprises and would much rather hear about a small annoyance before it becomes a big problem.



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