CHEMICAL PEEL INSTRUCTIONS

What Can I Expect After Surgery?

There will be a mild to moderate amount of discomfort associated with the procedure. This should be easily controlled with oral medications. Tylenol with codeine (or equivalent if allergy to codeine exists) is generally always sufficient for pain control. Occasionally, using a medication to help you sleep may be useful for the first 7 to 10 days after the peel. After the peeling surgery, pain should really not be a major problem for you. The skin often feels like it has been sunburned.

After the initial application of the peel solution, you will feel a stinging pain for a few minutes. Within several hours, expect the pain to reoccur and last for 6 to 8 hours. Swelling will also begin to develop in earnest around this time. Ice wrapped in a dry cloth may be applied to the peeled areas for relief of some of the pain. The ice should only be used for the first 24 hours after the procedure.

The discomfort should begin to significantly decrease after 24 hours, and, a significant increase in pain after this period should prompt you to call the office. Severe pain is rare; if you experience this, please contact us immediately.

Bruising and swelling are to be expected after the peeling surgery. These symptoms will peak within the first 36 to 48 hours after surgery, and will gradually subside over the next 7 to 10 days. To minimize the swelling, you should sleep with your head elevated for 3 weeks after the surgery.

Within 24 hours, the top layer of the skin will blister and peel. The peeled areas will resemble a deep sunburn. It is not unusual to have some slight drainage for the first few days after surgery. This will most often significantly improve or disappear by the end of the first week.

Prior to surgery, most patients should be on Retin-A, a glycolic acid skin regimen and a vitamin C skin preparation for a minimum of 4 to 6 weeks. This treatment plan is important in optimally preparing the skin prior to surgery, in order to provide you with the best result possible. In addition, dark haired, dark eyed patients may also be placed on a pigment gel to help redistribute and stabilize the pigment cells of the skin. These medications may all be purchased at the office. Information, as to how and at what times to use the different preparations, will be provided to you.

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.
- You should also purchase the following supplies prior to surgery:
 - o a fresh 2 liter bottle of hydrogen peroxide.
 - o a generous supply of gauze sponges.
 - o Benadryl tablets (25 mg). These are available without a prescription.
 - o a large container of Aquaphor.
- 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.
- 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 sunning the face for 1 year. Whenever you go out in the sun, use at least an SPF 15 sunscreen. Sun exposure may lead to hyperpigmentation or excess darkening of the treated areas. Although, this is generally treatable with pigment gels, they may take a while to work. Therefore, avoid the sun. If at all possible. Broad rimmed hats are also quite useful in this regard.
- You may have your hair washed at a salon or wash it gently yourself 24 hours after your surgery. Be sure to use shampoo which is gentle such as Johnson's Baby Shampoo.
- Take only prescribed medication or Tylenol, never aspirin or other NSAIDS, as they promote bleeding.

- After the laser surgery, the treated areas will be covered with ointment. You may notice some clear or yellow oozing from these areas for up to 7 days after the surgery. This is normal and expected.
- It is critically important to keep the treated areas moist at all times. They should never be allowed to dry and form crusts.
- For the first 24 hours after the surgery, simply keep reapplying ointment (aquafor or other ointment as prescribed by the office) to keep the treated areas moist. It is not necessary to start soaks until after the first 24 hours have elapsed. Now, using the gauze sponges, soak the treated areas with a solution of 1 tablespoon of white vinegar mixed with 1 cup of clean, cool water. Do the soaks for 20 to 30 minutes at a time. You should find the soaks to be soothing. If the solution is irritating for some reason, the vinegar may be diluted by half (one half a tablespoon of vinegar to one cup of water). The soaks should be repeated 6 times per day, until the skin is fully epithelialized. This will generally take 7 to 10 days.
- After each soak, either Aquaphor or other prescribed ointment, should be liberally applied to the treated areas. Do not pick or otherwise remove crusted areas. Do not allow the treated areas to dry out or scab over. For the first week, the ointment should be applied 'like icing on a cake.' A thin coat may be applied after the first week and we will demonstrate that at your one week postoperative visit.
- It is not uncommon to experience some itching as the treated skin heals. This commonly occurs between 5 to 7 days. Hydrocortisone cream may be applied to the itchy areas before applying the ointment. You may also use benadryl to ease the itch (follow product instructions). Note that benadryl will cause sedation. It should generally not be used at the same time as sleeping pills or pain pills. If in doubt, ask your pharmacist. It is not unusual for patients to get itchy at night while they are sleeping. This can cause scratch marks on the healing skin that will slow healing. Wearing bulky mittens (with no finger pockets) to bed may decrease this problem.
- Between 2 weeks and 2 months after the surgery, it is not uncommon to note the presence of what look like white heads on the treated areas. These are, in fact, milia. They represent areas where fresh epithelium has overgrown the underlying glands. They may be gently scrubbed and removed. If you are having trouble removing them, we will be happy to help you in the office.
- Do not rub or massage your face until after you are examined and told it is all right to do so. Likewise, do not wear make-up until your surgeon says that it is all right to do so. Generally, you will be able to cover the treated areas with make-up within 7 to 10 days. At this time the skin will be fully resurfaced (no weeping, blistering or breaks in the skin) and soaks will no longer be necessary. You will find that make-up is somewhat more difficult to apply to the treated areas. They are, in fact, so smooth, that the make-up will often almost slide off. We will suggest certain products if you are having this problem
- Contact lenses should not be worn for the first 10 to 14 days after laser surgery to the eye area, as placing them into your eye may put some strain on your healing face.
- You will notice crusts on the skin. Never pick at the crusts or pieces of skin that do not loosen easily. If you keep them generously coated, they should come off easily on their own with time.
- Your skin will be bright red after the procedure. This is to be expected. The redness will gradually fade and begin to return to a more normal color around the third week after surgery. However, some residual pink or light red color will persist for 6 to 12 weeks.

- The length of time it will take for a complete return to normal coloration is variable. Generally, persons with red hair or freckles will be red for somewhat longer periods of time than other people.
- Retin-A, glycolics and vitamin C preparations should not be used after the surgery until you are told by Dr. Verret that it is all right to do so. Generally, you should start back on this regimen 4 to 6 weeks after the surgery. This should be a gradual process. The Retin-A should be started first and used alone for 2 weeks. Then, the glycolics should be added 2 weeks later. Finally, the vitamin C preparation is added a further 2 weeks after that. Using this skin care regimen will enhance your surgical results and help restore damaged skin. You will notice that the treated skin looks smoother and generally more youthful at 2 to 3 weeks after the surgery. It will look even better in a few months as the effects of the laser act to slowly tighten the skin's collagen.
- If the nose area has been peeled (as in a full face peel), you should wait two weeks before wearing eyeglasses. The pressure of glasses resting on the nose (except for very brief periods of time) is to be avoided.

Contact the Office Immediately

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

- 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.
- development of cold sores, or small blisters on the resurfaced skin.

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. Treated areas will begin to swell and burn more at around 6 to 8 hours after the peel. Treated areas are bright red.
- **Day 2** Maximum bruising and swelling. Start soaks with peroxide once upper layers of skin have peeled off. Apply ointment after soaks. Repeat 6 times per day.
- **Days 5-7** Swelling and bruising starting to go away. Skin is being resurfaced. Discomfort much less. May start to itch (use hydrocortisone cream and benadryl).
- **Days 10-14** Usually the skin is fully resurfaced by now. May stop using soaks, and may start using make-up (once told by Dr. Verret).
- Weeks 6-12 Redness usually faded by now.
- **3 Months** Enjoy your result and avoid the sun. You should be back on Retin-A, gylcolic acid and the vitamin c preparation.

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.