



Breast Augmentation

Pre-Operative Instructions

- Please advise Dr. Robbins if you are taking any blood thinning medications (e.g., Warfarin, Ibuprofen, NSAIDs, Plavix, Aspirin). These will need to be discontinued prior to surgery per Dr. Robbins' instructions or the physician that manages these medications.
- **DO NOT** take any of the following 10 days prior to surgery:
 - Anti-inflammatories (ibuprofen, Aleve, Motrin, Excedrin, OTC pain medication Tylenol is the ONLY acceptable pain medication to take prior to surgery.)
 - Homeopathic medications (If you are unsure then do not take.)
 - Vitamin E, Fish Oil or Multivitamin
- Take a bath or shower daily with an anti-bacterial liquid soap, like dial liquid soap, or hibiclens starting 3 days prior to surgery. These can be purchased at any drug store.
- **DO NOT** eat or drink after midnight the night before surgery. That means NO FOOD OR ANY LIQUIDS INCLUDING WATER.
- **DO NOT** wear jewelry, dentures, hearing aids, or contact lenses the of surgery.
- **DO NOT** wear make- up, moisturizer, lipstick, deodorant, or nail polish the day of surgery.
- Wear comfortable, loose-fitting clothing that buttons or zips in the front. No skinny jeans or leggings the day of surgery. No clothing with any metal on it.
- You will need to arrive 2 hours prior to your surgery time or advised. The arrival time is enclosed in your folder.
- You must bring a driver to take you home after surgery.

Post- Operative Instructions

MEDICATIONS

You will be prescribed a **pain**, (Percocet/oxycodone, or Dilaudid/hydromorphone), **anti-nausea** (*Phenergan/promethazine or Zofran/ondansetron*) and **antibiotic** Keflex/cephalexin, doxycycline, or Cipro/ciprofloxacin) **medication**. The goal is to stay ahead of the pain so you can rest comfortably and eat/drink without nausea or constipation. Our office recommends starting an over the stool softener, Miralax, Dulcolax prior to surgery. After surgery it is recommended to take it preventatively every day until you are no longer on the narcotic pain medicine. IF YOU HAVE NOT HAD A bowl movement 3-4 days following surgery then you may

take Milk of Magnesia or Magnesium Citrate. These are both available over the counter. Follow the instructions listed on the package. **(SEE ATTACHED MEDICATION LIST)**

- Your **pain** medication should be taken with food in your stomach, even if you don't have an appetite, have some crackers or yogurt with it. This will prevent nausea caused by the pain medicine.
- Your **antibiotic** is to prevent infection, take the medicine as prescribed beginning the day you get home from surgery until the entire bottle is empty. This DOES NOT need to be taken prior to surgery.
- DO NOT take aspirin or any products containing aspirin or ibuprofen, Aleve, Motrin **until 5 days after surgery.**
- **Take ALL your medications as prescribed, at least for the first 72 hours after surgery.**
- You may resume aspirin or any products containing aspirin, ibuprofen, and vitamins 5 days after surgery.
- Have someone drive you home after surgery and help you at home for as long as you are on the pain medication and/or muscle relaxer.
- You will have prescription for an antibiotic as well as a pain medication that you need to start when you get home after surgery. You DO NOT need to take this prior to surgery unless instructed by our office.
- Cough and deep breathe every 2 hours to prevent pneumonia.
- Avoid strenuous activity (jogging, running, any activity that increases your heart rate), lifting over 8 pounds, and any vigorous activity (pushing, pulling) for 3 weeks following surgery. You may lift over 25 pounds after 4 weeks. Walking is a normal activity that should be restarted right away. You should be up walking around the house following your surgery.
- **If your surgery is on a Monday, you may shower on Thursday. If your surgery is on Wednesday, you may shower on Saturday. If your surgery is on Friday, you may shower on Monday.**
- Once you remove ace wrap and shower, you will need to start wearing a front closure sports bra. This may be purchased at Target, Walmart, Amazon. The compression front closure bra will not need to be worn until 3 days after your surgery. (SEE ABOVE FOR SHOWER DAY.) The compression bra will be worn for the first 3 weeks, day and night. Then it is to be worn weeks 4, 5 and 6 in the daytime only. You may continue to wear it longer even after the 6 weeks.
- Leave the tape/steri-strips in place, over your incisions, this will help with scarring. They will fall off on their own at approximately 3 weeks. After 3 weeks you may remove the tape and use a silicone-based scar cream or tape to the incisions. This can be purchased from our office or online.

- Massaging the breast and bra bands following surgery are not required or recommended. They will not improve the time that the implants will need to settle into their final position.
- Breast implants sit high on the chest for months following surgery. The implants will settle into their final position over time.
- No driving until completely off narcotic pain medication and muscle relaxer.
- If you are a smoker, remain smoke free for at least 6 weeks after surgery.
- DO NOT use ice or heat on your chest for pain relief. The skin in this area may be numb therefore making it more susceptible to a burn.
- You will need to sleep elevated either in a recliner or in the bed with lots of pillows for the first week. Then you may sleep as you can tolerate after that point.

What to Expect

- Discomfort will be maximal in the first 3 days; it should improve each day thereafter.
- After surgery your chest will feel tight and heavy from swelling.
- There will be post-operative pain, temporary bruising, discomfort, numbness, swelling and discoloration.
- You will be returning to see Dr. Robbins 1 week post operatively.
- Scars will be red for 2-3 months and then fade and soften.
- Your sutures will dissolve on their own.

When to Call the Office

- If you have severe or increased pain not relieved by medication.
- If you are having side-effects to medications, such as rash, nausea, headache, or vomiting.
- If you have a temperature > 101.5 degrees.
- If you have drainage from the incision or drains with a foul odor.
- If you have bleeding from the incisions that does not stop with pressure.
- Excessive warmth or redness that is spreading from the incision site.

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