

GYNECOMASTIA WITH FREE NIPPLE GRAFTS

Pre-Operative Instructions

- Please advise Dr. Robbins if you are taking any blood thinning medications (e.g., Warfarin Ibuprofen, NASAIDS, 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.

DRESSINGS/SHOWERING/SUTURES

- 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.
- You may not shower or get the chest wet until you are seen for your 1 week visit with Dr. Robbins. At that visit we will remove the ace bandage to your chest and remove the bolster or protectors on your nipples and areola. Then you may shower following your first 1-week visit. Then you will apply Neosporin to the remaining sutures to your areolas, twice a day and then apply a gauze and your compression shirt/vest.
- At your 2 week visit we will remove the remaining sutures to your nipples and areolas.
- After your 1 week visit then you may shower, you will need to start wearing a tight-fitting athletic shirt (i.e., Under Armour) or a compression vest. This may be purchased at any athletic store like Dick's, Sports Authority or Amazon. Go down a size to insure it is tightly compressed on the chest. The compression shirt/vest will not need to be worn until 1 week after your surgery. (SEE ABOVE FOR SHOWER DAY.) The compression shirt/vest 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.

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
- Your anti-nausea medication is prescribed since narcotic pain meds can increase your chance of nausea/vomiting
- 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

- Take ALL your medications as prescribed, at least for the first 24-48 hours after surgery
- 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.

DRAINS

Your surgery requires the placement of a drain(s), you'll be instructed on how to empty the drain, strip the tubing and record the volume of drainage.

- Drain(s) are sutured to the skin where the drain exits the body and are usually in place for an average of 1-2 weeks. However, some may stay longer than that time depending on their output.
- The drain works by suction and must be kept tightly closed except during emptying.
- **Strip the Tubing, Empty and Record** the amount of drainage at least **twice a day** notating the date, time of day, drain number, and amount of drainage.
- **Maintain an accurate daily drain log** and bring with you to each appointment. This is how a determination will be made if your drain is ready for removal.
- Drains are **NOT** removed the first week after surgery.
- When exterior dressings are removed at the first shower, **remove any small "donut" dressings** at the site where the tubing exits the body. We want soap and water to clean the skin and area where the drain comes out of the skin.
- Use a **fanny pack or neck lanyard to hold the drains** in place while in the shower or moving about. NEVER let the drains hang unattended!
- Apply Neosporin or Triple Antibiotic Ointment around the drain and drain opening two times a day at each drain site while drains are in place. You may begin applying this after you have showered on day 3.
- Instructional drain video is located on our website.
 - www.robbinsplasticsurgery.com then click the tab for video gallery, drop for video gallery, body then post op care. The drain video is the first video listed on that page.

WHEN TO CALL 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 that has 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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