



CHARLOTTESVILLE

PLASTIC SURGERY

Blepharoplasty

Pre-Operative Booklet

SURGERY DATE: _____

Location: ___ UVA Outpatient Surgical Center - Riverside
 ___ Soaring Surgical Center
 ___ Sentara Martha Jefferson Outpatient Surgery Center

FOLLOW-UP APPOINTMENT: ___/___/___ at _____ am/pm

Location: Charlottesville Plastic Surgery Main Office

IMPORTANT PHONE NUMBERS

- Plastic Surgery Office: **(434) 227-5333**
- After Hours: Call **(434) 227-5333** and listen to the prompts for “after-hours on-call surgeon.”
- If your surgery is at Martha Jefferson Outpatient Surgery Center, you will receive a call the day prior to your surgery to advise you of your arrival time.
- If your surgery is at UVA Riverside or Soaring Surgical Center, you will receive a call a couple of days prior to your surgery to advise you of your arrival time.

INTRODUCTION

Welcome to the Charlottesville Plastic Surgery and thank you for allowing us to be part of your healthcare team. We recognize that you are receiving a lot of new information and making important decisions regarding your health and well-being.

Please read through this pre-operative packet prior to your surgery. Hopefully it will answer most of your questions about what to expect before and after the surgery, but we encourage you to make a list of any remaining questions and we will be happy to answer them. You may call or email us at any time.

- We will provide you with medications for pain, nausea, constipation, and an antibiotic to prevent infection. These prescriptions will be called in to your preferred pharmacy prior to your surgical date. These medications are to be taken AFTER your surgery but we suggest you fill them before the day of surgery for your convenience. If you need clarification on any of the medications or have preferences for different medications, please let us know before your surgery.
- Remember not to eat or drink anything after midnight the night before your surgery.
- You will need to arrange for someone to bring you and take you home from surgery and to stay with you the first night after surgery. You should also arrange for transportation to your first post-operative visit.

FINANCIAL POLICIES

Our Patient Care Coordinator is very knowledgeable in this area and will help in the process of determining your insurance benefits, if applicable. If you do not have coverage, she can provide you with a price quotes and, if necessary, connect you with financial assistance programs.

- **INSURANCE COVERAGE (if applicable)**

- The benefits paid by insurance companies vary greatly. It is helpful if you call your insurance before your first appointment to find out your benefits and requirements. It is important to realize that even if your surgery is covered, there is often a deductible and/or co-payment for which you are responsible. Our office staff is very familiar with the process and can help you be optimally prepared.

- **PAYMENT OPTIONS FOR SELF PAY**

- On the day of your first consultation, you will be provided a financial quote which includes the surgery, anesthesia, operating room costs, and follow-up care. It does not include pathology costs or prescription medications. It does not include management of complications or revisions.
- A deposit of \$500 will be required to schedule a surgery date. This will be applied toward the total surgery costs.
- Full payment of the quote is due in full **2 weeks** prior to the surgery date.
- We provide a number of payment options that may be used individually or combined according to your wishes.
 - **CASH OR CHECK:** cashier's check, personal check, or cash. Checks must be made payable to Charlottesville Plastic Surgery and received no later than 2 weeks before your surgery.
 - **CREDIT CARDS:** Visa, Master Card, Discover or American Express.
- **OPTIONAL FINANCING PLANS:** We will be happy to assist you with applying for financing should you so desire.

- **CANCELLATION POLICY**

- We understand that a situation may arise that could force you to cancel or postpone your surgery. If this should happen, please call us as soon as possible at 434-227-5333 to discuss your situation. If we do not get enough notice, your deposit may not be refunded.

PRE -OPERATIVE PLANNING

- After your pre-operative appointment, you will work closely with our Patient Care Coordinator to complete any necessary paperwork and requirements for payment or insurance authorization.
- Fill your prescriptions prior to the day of surgery to save time on the way home. Please call our office if you are unclear about where or when you will be receiving your prescriptions.
- Do not take medications that contain Aspirin or Ibuprofen (see list included in this packet) for 2 weeks before your surgery date to reduce the risk of bleeding. You may resume taking them 2 days after the surgery.
- Check with the pre-operative nurse whether you should take your regular medications on the morning of surgery. You will speak with him or her before surgery when you find out your surgery arrival time.
- Do not smoke for 3 weeks before your surgery as this will delay healing! Also avoid second-hand smoke and cigarette replacements such as nicotine patches or gum.
- **Arrange for someone to take you to and from the hospital and be with you during the first 24 hours after the surgery.**
- Call our office if you have any sign of illness or infection the week before the surgery.

PRE-OPERATIVE SUPPLIES

The following is a list of optional items that can help you be prepared for your surgery.

- **Prescription medications-** fill before surgery date
- **Tylenol, Ibuprofen-** These will be the primary pain medications once you are off the prescription medications
- **Multivitamins-** suggested to take 2 weeks before and after your surgery to promote healing
- **Vitamin C-** 500mg 2x day can help your healing. Start 2 weeks before surgery
- **Straws (bendy type)-** will help you drink more fluids to stay hydrated after surgery
- **Ice packs/frozen peas-** to help with swelling after the surgery
- **Chapstick**
- **Gauze pads (2x2 or 4x4 size)-** these can be found in the pharmacy and will be useful for icing your eyes the first 24 hours after surgery. Look for the non-sterile multi-packs as they are less expensive.
- **Gentle Foods-** light food is best the first day or two after surgery so as not to upset the stomach. Ideas include crackers, soups, juice and clear soda, light soups, pudding, applesauce, yogurt, toast. Once your appetite returns, you can eat what sounds good.
- **Pillows and a comfortable place to rest after surgery-** a recliner is helpful for keeping your head elevated for the first few days after surgery. Multiple pillows on your bed to prop your head up on will also help elevation.
- **Button-up shirts-** These will be easiest to get in and out of for the first week after surgery. Bring one with you the day of surgery to go home in.

THE DAY OF SURGERY

- Do not eat or drink anything after midnight the night before surgery
- Shower with antibacterial soap and brush your teeth the morning of surgery!
- Do not apply moisturizers or wear makeup
- Remove any jewelry and/or piercings and leave them at home
- Bring loose comfortable clothes for after surgery including button-up shirt and soft pants.
- Arrive at hospital at the designated time and check in at the front desk
- You must have someone with you the day of surgery to drive you home and take care of you the first night after surgery at a minimum.

EXPERIENCE AT THE HOSPITAL ON DAY OF SURGERY

Going to the operating room is not a normal experience for most of us. Dr. Willis and all of the professional staff caring for you recognize the natural anxiety with which most patients approach this step in the process of achieving their goals. We believe a description of the surgery experience will be helpful.

- When you arrive at the hospital, you will check in at the front desk and will be directed to the surgical floor. From there you will be escorted to the pre-op room. You will be asked to change into a gown. A nurse will start an IV and review your health history. You will meet with the anesthesiologist who will review with you the plan for anesthesia. You will meet with Dr. Willis and go over the plan for surgery and review any questions you might have.
- You will then be brought back to the operating room where the staff will do everything they can to make you feel secure. You will lie down on a padded operating table with warm blankets and the nurse and the anesthesiologist will connect you to state-of-the-art monitoring equipment. You will breathe oxygen through a mask as medicines that will make you drowsy will flow through the IV tubing into a vein in your arm.
- When your surgery has been completed, you will be moved to the recovery room. During this period, a recovery room nurse will take care of you and remain with you at all times. If you have pain, she will give you medication through your IV. Your stay in the recovery room will last 30-60 minutes after surgery.
- Once you are more alert, you will be transferred from the recovery room back to the room you started in. Your family and friends will be able to visit you here. When you feel comfortable enough, you will be able to go home with your arranged driver.

THE FIRST WEEK AFTER SURGERY

- Keep your head elevated to decrease swelling. You can rest in a recliner or put extra pillows on your bed to keep your head up.
- It will be important to ice your eyes the day after the surgery. The easiest way to do this is to keep a small cup with ice and a stack of 2x2 or 4x4 gauze at your bedside and place the cool gauze directly on your eyes. Exchange them every 15-20 minutes with new cold ones. You may also use the hospital provided ice packs.
- Activity Restrictions: No lifting, bending, strenuous activity. You may get dizzy walking around, so make sure to move slowly and be ready to sit down.
- Eat soft, easy to chew and digest foods.
- Do not be worried if you have some asymmetry with your eyes as this is common with swelling and healing.
- Call our office or the hospital operator if you have ANY concerns after surgery; specifically increased bleeding or drainage, uncontrolled pain, fever, rashes, itchiness, uncontrolled vomiting, or other problems.
- You may shower 2 days after surgery.

ONE WEEK AFTER SURGERY

- You will have a post-op visit at which time your stitches will be removed.
 - You may apply lotions and makeup to your skin
 - You may resume driving after 1 week as long as you are no longer using narcotics.
 - You may return to light duty/desk jobs after 1-2 weeks if you are recovering well

THREE WEEKS AFTER SURGERY

- You will return for a second post-op visit
- We will have you begin gentle scar massage.
- OK to start exercising

WHAT TO EXPECT WHILE YOU HEAL

Normal Symptoms	<ul style="list-style-type: none">▪ SWELLING AND BRUISING: Moderate swelling and bruising are normal after any surgery. Severe swelling and bruising may indicate bleeding, allergic reaction, or possible infection.▪ DISCOMFORT AND PAIN: Mild to moderate discomfort or pain is normal after any surgery. Our goal is to minimize your discomfort using oral pain medication. This will not eliminate all pain, but it should allow you to perform basic daily. If the pain becomes severe and is not relieved by pain medication, please call us at (434) 227 -5333.▪ CRUSTING ALONG THE INCISION LINES: We usually treat this with antibiotic ointment.▪ NUMBNESS: Small sensory nerves to the skin surface are cut when the incision is made or interrupted by undermining of the skin during surgery. The sensation in those areas gradually returns--usually within 2 or 3 months as the nerve endings heal spontaneously. However, there may always be some degree of numbness or impaired sensation in the surgical area.▪ ITCHING: Itching and occasional small shooting electrical sensations within the skin frequently occur as the nerve endings heal. Ice, skin moisturizers, and massages are frequently helpful. These symptoms are common during the recovery period.▪ REDNESS OF SCARS: All new scars are red, dark pink, or purple. Scars on the face usually fade within 3 to 6 months. Scars may take a year or longer to fade completely. Avoid direct sun exposure to the surgical area.
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Contact Your Physician's Office	<ul style="list-style-type: none">▪ Fever over 100.4 F▪ Pain not controlled by current prescription medications▪ Uncontrolled nausea and vomiting▪ Increased bleeding or drainage from the surgical site▪ Severe swelling, bruising or increasing redness
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UNDERSTANDING SURGICAL RISK

We want you to understand fully the risks involved in surgery so that you can make an informed decision. Although complications are infrequent, all surgeries have some degree of risk. All of us at Charlottesville Plastic Surgery will use our expertise and knowledge to avoid complications in so far as we are able. If a complication does occur, we will use those same skills in an attempt to solve the problem quickly. The importance of having a highly qualified medical team and the use of a certified facility cannot be overestimated.

In general, the least serious problems occur more often and the more serious problems occur rarely. If a complication does arise, you, your surgeon, and the nursing staff will need to cooperate in order to resolve the problem. Most complications involve an extension of the recovery period rather than any permanent effect on your final result.

All Plastic Surgery treatments and operations are performed to improve a condition, a problem or appearance. While the procedures are performed with a very high probability of success, disappointments occur and results are not always acceptable to patients or the surgeon. Secondary procedures or treatments may be indicated. Rarely, problems may occur that are permanent.

Please read through the following pages that describe potential risks. Mark any that you would like to discuss in more detail on the day of surgery as you will have a chance to ask questions to your surgeon.

<p>General Surgical Risks</p>	<ul style="list-style-type: none"> ▪ HEMATOMA: Small collections of blood under the skin are usually allowed to absorb spontaneously. Larger hematomas may require aspiration, drainage, or even surgical removal to achieve the best result. ▪ INFLAMMATION AND INFECTION: A superficial infection may require antibiotic ointment. Deeper infections are treated with antibiotics. Development of an abscess usually requires drainage. ▪ WOUND SEPARATION OR DELAYED HEALING: Any incision, during the healing phase, may separate or heal unusually slow for a number of reasons. These include inflammation, infection, wound tension, decreased circulation, smoking or excess external pressure. If delayed healing occurs, the final outcome is usually not significantly affected, but secondary revision of the scar may be indicated. ▪ SENSITIVITY OR ALLERGY TO DRESSINGS OR TAPE: Occasionally, allergic or sensitivity reactions may occur from soaps, ointments, tape or sutures used during or after surgery. Such problems are unusual and are usually mild and easily treated. In extremely rare circumstances, allergic reactions can be severe and require aggressive treatment or even hospitalization. ▪ THICK, WIDE, OR NOTICEABLE SCARS: Abnormal scars may occur even though we have used the most modern plastic surgery techniques. Injection of steroids into the scars, placement of silicone sheeting onto the scars, or further surgery to correct the scars is occasionally necessary. Some areas on the body scar more than others, and some people scar more than others do. Your own history of scarring should give you some indication of what you can expect. ▪ INJURY TO DEEPER STRUCTURES: Blood vessels, nerves and muscles may be injured during surgery. The incidence of such injuries is rare. ▪ POOR RESULTS: Asymmetry, unhappiness with the result, poor healing, etc. may occur. Minimal differences are usually acceptable. Larger differences frequently require revision.
<p>Serious Surgical Risks</p>	<p>Medical complications such as pulmonary embolism, DVT (blood clot), severe allergic reactions to medications, cardiac arrhythmias, heart attack, and hyperthermia are rare but serious and life threatening problems associated with surgery. Having a board-certified anesthesiologist present at your surgery reduces these risks as much as possible. Failure to disclose all pertinent medical data before surgery may cause serious problems for you and for the medical team during surgery.</p>
<p>Smoking Risks</p>	<p>Smoking may adversely affect wound healing and cause loss of skin. Smoking reduces arterial (blood) oxygen supply which is necessary for normal wound healing. Exposure to second hand smoke has also been implicated in delayed or abnormal wound healing. It is best to avoid smoking and or second hand smoke in the peri-operative period. Nicotine causes blood vessels to constrict and may interfere with normal wound healing. When blood vessels constrict there is less blood supply to the wound and therefore less oxygen for normal wound healing to take place. Avoid cigarette replacements such as the nicotine patch or nicotine gum or inhaler in the peri-operative period as these have similar effects as smoking and second hand smoke.</p>

Medications to Avoid Before and After Surgery

If you are taking any medications on this list, they should be discontinued 10-14 days prior to surgery and only Tylenol should be taken for pain. It is absolutely necessary that all other medications that you are currently taking must be specifically cleared by your doctor and nursing staff prior to surgery.

SEMI-GLUTIDE (GLP-1 Antagonist such as Ozempic, Wegovy, Rybelsis, Trulicity, etc):

If taken weekly for weight loss, you must discontinue use for 1 week prior to surgery. If taken daily for weight loss, you must discontinue use for one day prior to surgery. If taken for Type II Diabetes, please follow instructions from your PCP or other Prescriber regarding your dosage before and after surgery.

Aspirin Medications to Avoid		
<ul style="list-style-type: none"> ■ 4-Way Cold Tabs ■ 5-Aminosalicylic Acid ■ Acetilsalicylic Acid ■ Adprin-B products ■ Alka-Seltzer products ■ Amigesic ■ Anacin products ■ Anexsia w/Codine ■ Argesic-SA ■ Arthra-G ■ Arthritis products ■ Arthritis Foundation products ■ Arthritis Pain Formula ■ Arthritis Strength BC Powder ■ Arthropan ■ ASA ■ Asacol ■ Ascriptin products ■ Aspergum ■ Asprimox products ■ Axotal ■ Azdone ■ Azulfidine products ■ B-A-C ■ Backache Maximum Strength Relief ■ Bayer Products ■ BC Powder ■ Bismatrol products ■ Buffered Aspirin ■ Bufferin products ■ Buffetts 11 ■ Buffex ■ Butal/ASA/Caff ■ Butalbital Compound ■ Cama Arthritis Pain Reliever ■ Carisoprodol Compound ■ Cheracol ■ Choline Magnesium Trisalicylate ■ Choline Salicylate ■ Cope ■ Coricidin 	<ul style="list-style-type: none"> ■ Cortisone Medications ■ Damason-P ■ Darvon Compound-65 ■ Darvon/ASA ■ Dipentum ■ Disalcid Doan's products ■ Dolobid ■ Dristan ■ Duragesic ■ Easprin ■ Ecotrin products ■ Empirin products ■ Equagesic ■ Excedrin products ■ Fiorigen PF ■ Fiorinal products ■ Gelpirin ■ Genprin ■ Gensan ■ Goody's Extra Strength Headache Powders ■ Halfprin products ■ Isollyl Improved ■ Kaodene ■ Lanorinal ■ Lortab ASA ■ Magan ■ Magnaprin products ■ Magnesium Salicylate ■ Magsal ■ Marnal ■ Marthritic ■ Meproamate ■ Mesalamine ■ Methocarbamol ■ Micrainin ■ Mobidin ■ Mobigesic ■ Momentum ■ Mono-Gesic ■ Night-Time Effervescent Cold ■ Norgesic products ■ Norwich products 	<ul style="list-style-type: none"> ■ Olsalazine ■ Orphengesic products ■ Oxycodone ■ Pabalate products ■ P-A-C ■ Pain Reliever Tabs ■ Panasal ■ Pentasa ■ Pepto-Bismol ■ Percodan products ■ Phenaphen/Codeine #3 ■ Pink Bismuth ■ Propoxyphene ■ Compound products ■ Robaxisal Rowasa ■ Roxeprin Saleto products ■ Salflex ■ Salicylate products ■ Salsalate ■ Salsitab ■ Scot-Tussin Original ■ 5-Action Sine-off ■ Sinutab ■ Sodium Salicylate ■ Sodol Compound ■ Soma Compound ■ St. Joseph Aspirin ■ Sulfasalazine ■ Supac ■ Suprax ■ Synalgos-DC ■ Talwin ■ Triaminicin ■ Tricosal ■ Trilisate ■ Tussanil DH ■ Tussirex products ■ Ursinus-Inlay ■ Vanquish ■ Wesprin ■ Willow Bark products ■ Zorprin

Medications to Avoid Before and After Surgery

<u>Ibuprofen</u> Medications to Avoid			
<ul style="list-style-type: none"> Actron Acular (ophthalmic) Advil products Aleve Anaprox products Ansaid Cataflam Clinoril Daypro Diclofenac Dimetapp Sinus Dristan Sinus Etodolac Feldene Fenoprofen Flurbiprofen Genpril Haltran 	<ul style="list-style-type: none"> Ibuprin Ibuprofen Ibuprohm Indochron E-R Indocin products Indomethacin products Ketoprofen Ketorolac Lodine Meclofenamate Meclomen Mefenamic Acid Menadol Midol products Motrin products Nabumetone Nalfon products Naprelan 	<ul style="list-style-type: none"> Naprox X Naproxen Nuprin Ocufen (ophthalmic) Orudis products Oruvail Oxaprozin Piroxicam Ponstel Profenal Relafen Rhinocaps Sine-Aid products Sulindac Suprofen Tolectin products Tolmetin Toradol 	<ul style="list-style-type: none"> Naprox X Naproxen Nuprin Ocufen (ophthalmic) Orudis products Oruvail Oxaprozin Piroxicam Ponstel Profenal Relafen Rhinocaps Sine-Aid products Sulindac Suprofen Tolectin products Tolmetin Toradol

<u>Other</u> Medications to Avoid			
<ul style="list-style-type: none"> 4-Way w/ Codeine A.C.A. A-A Compound Accutrim Actifed Anexsia Anisindione Anturane Arthritis Bufferin BC Tablets Childrens Advil Clinoril C Contac Coumadin Dalteparin injection 	<ul style="list-style-type: none"> Dicumerol Dipyridamole Doxycycline Emagrin Enoxaparin injection Naprosyn products Flagyl Fragmin injection Furadantin Garlic Heparin Hydrocortisone Isollyl Lovenox injection Macrochantin 	<ul style="list-style-type: none"> Mellaril Miradon Opasal Pan-PAC Pentoxifylline Persantine Phenylpropanolamine Prednisone Protamine Pyrroxate Ru-Tuss Salatin Sinex Sofarin Soltice 	<ul style="list-style-type: none"> Sparine Stelazine Sulfinpyrazone Tenuate Tenuate Dospan Thorazine Ticlid Ticlopidine Trental Ursinus Vibramycin Vitamin E Warfarin

<u>Tricyclic Antidepressant</u> Medications to Avoid			<u>Herbal</u> Medications to Avoid
<ul style="list-style-type: none"> Adapin Amitriptyline Amoxapine Anafranil Asendin Aventyl Clomipramine Desipramine Doxepin Elavil 	<ul style="list-style-type: none"> Endep Etrafon products Imipramine Janimine Limbitrol products Ludiomil Maprotiline Norpramin Nortriptyline Pamelor 	<ul style="list-style-type: none"> Pertofrane Protriptyline Sinequan Surmontil Tofranil Triavil Trimipramine Vivactil 	<ul style="list-style-type: none"> Echinacea Ginkgo Biloba Ginseng St. John's Wort