

**Brachioplasty
Pre-Operative Booklet**

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**CHARLOTTESVILLE
PLASTIC SURGERY**

SURGERY DATE: _____

Location: ___ **UVA Surgical Care Riverside**
___ **Sentara Martha Jefferson Hospital**
___ **Sentara Martha Jefferson Outpatient Surgery Center**
___ **Soaring Surgical 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 at Martha Jefferson Outpatient Surgery Center, you will receive a call the day prior to advise you on your arrival time**
- **If your surgery is at UVA Riverside or Soaring Surgical Center, you will receive a call couple days prior to advise you on your on arrival time**

INTRODUCTION

Welcome to 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.

- This packet includes post-operative instructions. Please read it carefully!
- We will typically provide you with medications for pain, nausea, possibly a blood thinner (to prevent blood clots postoperatively), constipation, and possibly 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. Please refer to the surgery center guidelines when they call you.
- 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 provide you with a price quote and, if necessary, connect you with financial assistance programs.

▪ 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.
- Full payment of the quote is due at the preoperative appointment or at least **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: Cash, cashier's check or personal check. Checks must be payable to Charlottesville Plastic Surgery and received at least 2 weeks before surgery.

CREDIT CARDS: Visa, Master Card, Discover or American Express.

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. Please refer to your initial estimate for further cancellation details, or contact the Patient Care Coordinator and she will advise you.

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.
- Have your prescriptions filled prior to the day of surgery.
- Do not take medications that contain Aspirin or Ibuprofen (see long list at end of packet) for 2 weeks before your surgery date to reduce the risk of bleeding.
- Check with your surgeon or the Patient Care Coordinator as to whether you should take your regular medications on the morning of surgery, and/or the weeks prior to.
- Do not smoke for 4 weeks before your surgery as this will delay healing! Also avoid second-hand smoke and cigarette replacements such as nicotine patches or gum. Avoid smoking for 4 weeks after your surgery.
- **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.
- Shower with Hibiclens (provided to you) the night before AND the morning of the surgery. DO NOT use lotions, creams or deodorant.

PRE-OPERATIVE SUPPLIES

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

- **Prescription medications-** fill before surgery date
- **Hibiclens** - Shower with this the night before/morning of surgery.
- **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-** can decrease pain and reduce swelling. Do not place directly on incision lines!
- **Chapstick**
- **Cough Drops** - your throat can be sore after having the general anesthesia breathing tube
 - **Wetwipes/babywipes-** you will be restricted to sponge bathing the first two days after surgery and these will be nice to have
- **Neosporin or Bacitracin Ointment-** to be used on incisions after the first follow-up appointment
- **Gauze pads (4x4 size)-** these can be found in the pharmacy and may be useful after the first follow-up visit. 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 getting up and down but any comfortable space is fine. You will not be sleeping on your side or stomach afterwards so having multiple pillows to arrange around you will help keep you comfortable.
- **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.

MEDICATIONS PRESCRIBED

You will be prescribed *some or all* of the following medications. Please start these medications the afternoon after your surgery, unless specified otherwise.

Oxycodone 5mg - you will take this every 4 hours the first few days, as needed, for pain. You may alternate with Tylenol (Over the counter Tylenol and follow the dosing instructions on the back of the bottle). You can stagger these medications so you are taking something every two hours. You will take one and then the other. It is advised to take an Oxycodone prior to going to sleep the first few nights so you do not wake up with some discomfort. AFTER 48 HRS, you may start Ibuprofen. You can then alternate Tylenol and Ibuprofen and only use the Oxycodone for breakthrough pain

Colace (Docusate Calcium) 240mg - This is to prevent constipation. Take this twice a day while you are on narcotics.

Zofran (Odansetron) 4mg - This is an anti-nausea medication taken as needed. You may feel nauseated or vomit due to general anesthesia. This is normal in about 20% of the population. If you take Oxycodone on an empty stomach, it may also make you nauseated so take it with food.

Keflex (or Clindamycin) 500mg every 12 hrs - You will take this starting the afternoon after the surgery Please take the entire course of the antibiotics. If you think you are having a rash, or reaction, to the antibiotics, please call our office and stop the antibiotics.

Lovenox or Eloquis - You may receive this medication to prevent post-operative blood clots in your extremities.

THE DAY OF SURGERY

- Do not eat or drink anything after midnight the night before surgery
- Shower with antibacterial soap (Hibiclens) and brush your teeth the morning of surgery!
- Clean your bellybutton!
- 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 a button-up shirt and soft pants.
- Arrive at surgery center at the designated time and check in at the front desk
- You will be taught how to care for your drains in recovery.
- 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.
- Once awake enough, walk for approximately 5 minutes every 2 hours, 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. Your surgeon 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 surgery center, you will check in at the front desk. 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 your surgeon and go over the plan for surgery and review any questions you might have. Your surgeon will likely make markings on your arms at this time. You may have your family members step out during the markings if you prefer.
- You will then be brought back to the operating room and the staff will 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 the medicines that will make you drowsy 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 approximately 30-60 minutes after surgery.
- Once you are more alert, you will be transferred from the recovery room back to the room where you started. Your family and friends will be able to visit you here. When you feel comfortable enough, you may go home with your arranged driver.

THE FIRST WEEK AFTER SURGERY

- Keep the bandage on continuously, except to shower. Keep arms elevated on pillows. You may shower 48 hours after surgery.
- You may wash the ACE bandage, let it hang dry and then replace.
- You may remove any bandages prior to showering, but do not remove the tape (if any) as it will eventually remove itself.
- Replace bandages only if the original bandages continue to have drainage from the incisions
- WALK; it is very important to avoid postoperative blood clotting. Wear compression socks for one week after the procedure
- You may ice your arms for comfort but this is not necessary.
- Do not ice directly on the incision
- You may need assistance showering after surgery, as you may feel fatigued/weak.
- Having a plastic stool/chair in the shower may help
- Avoid ibuprofen or aspirin for 2 days after the surgery as this can lead to more bleeding. After 2 days, however, we encourage you to start taking these medications and weaning off the other pain pills.
- Remember that there will be significant swelling and bruising of the arms, hands, and fingers after surgery
- While there is always some asymmetry with the swelling, if one side looks significantly different or more painful than the other side, that might be a sign of bleeding and you should call us to discuss your concerns.
- You will have two drains- one on each side. The nurses in post-op will show you how to empty the drains and record the output. Bring your drain output record to your post op visits.
- The drains will have red/pink output and this is normal
- You may see flakes of solid material in the tubing and/or drains- this is normal
- Drainage output will vary day to day
- If the drains are emptying out 1+ bulbs in a 1-2 hour period immediately after your surgery, please give us a call as this could be a sign of bleeding
- You are encouraged to walk around after your surgery!
- A recliner may be the most comfortable place to sleep. Add pillows under your knees and upper back, and also use them to elevate your arms.
- No lifting (5+ lbs), bending, reaching overhead. No raising arms above shoulder level.
- No driving for at least 3 days and until you are off all narcotic pain medication.
- No long distance travel (including airline travel). Please discuss travel plans, if any, with your surgeon prior to surgery.
- Call our office or the hospital operator if you have ANY concerns after surgery; specifically increased bleeding or drainage, swelling, uncontrolled pain, fever, rashes, or other problems.

SECOND WEEK AFTER SURGERY

Activity restrictions: Still no strenuous activity, no heavy lifting over 10 lbs, etc.
Continue to wear compression garment AND continue to walk
You may return to light duty/desk jobs after 2 weeks if you are recovering well
Your second follow-up visit will be 4 weeks after the surgery.

THIRD WEEK AFTER SURGERY:

Continue to wear compression garments
Begin scar massage if all incisions healed (no scabs or open areas).
Silicone scar tape may be applied but please consult your surgeon first.
Walking is still encouraged. May resume light physical activity.

FOURTH AND FIFTH WEEK AFTER SURGERY:

Continue to wear compression garments as needed or directed by your surgeon.
Continue light physical exercise
You may have numbness and some tingling or shooting pain as your nerves recover.
After 6-8 weeks, you may begin to increase your exercise tolerance. Listen to your body!

ADDITIONAL FOLLOW-UP

- We typically will schedule a follow-up 3 months after the second visit, then 6 months after your third follow up if you desire.

SOME CONSIDERATIONS AS YOU HEAL

▪ FAMILY & FRIENDS

Support from family and friends is very helpful, but because they may not understand what constitutes a normal postoperative course, their comments may unintentionally create emotional turmoil for you. We will tell you honestly how you are doing and what we expect your result to be. Please trust in our knowledge and experience when we discuss your progress with you.

▪ DEPRESSION

Quite frequently patients experience a brief period of "let-down" or depression after surgery. Some may subconsciously have expected to feel and look better "instantly," even though they rationally understand that this will not be the case. Patients commonly question their decision to have surgery during the first few days after surgery. As the healing occurs, these thoughts usually disappear quickly. If you feel depressed, understanding that this is a "natural" phase of the healing process may help you to cope with this emotional state.

▪ HEALING

Everyone heals at their own pace. It is important to listen to your body and allow yourself to heal. Also, follow the advice of your surgical team and don't hesitate to ask questions! The guidelines in this packet are just that—guidelines—and they may need to be adjusted and individualized to your personal healing.

▪ FOLLOWING INSTRUCTIONS

Another major factor in the course of healing is whether you follow the instructions given verbally by your surgeon and in this booklet. Such guidelines are designed to promote the healing process and to prevent the occurrence of anything which may interfere with recovery. It is imperative that you recognize that you are a partner in this process and have a responsibility to follow instructions carefully. The instructions, based on broad experience, are designed to give you the best opportunity for healing without delay or surprise. Please ask if you have questions or need clarification!

COMPLICATIONS

Complications are rare, but unfortunately happen from time to time despite our best efforts. If and when they do occur, we are there to help you get through it. The vast majority of complications result in a delay in the normal healing process but do not affect the final result. Please trust us to help you get through it.

UNDERSTANDING SURGICAL RISK

We want you to fully understand 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 as 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.

