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AFTER CARE INSTRUCTIONS for ABDOMINOPLASTY (Tummy Tuck) and BELT LIPECTOMY (Body Lift)

MEDICATIONS

- You will be prescribed narcotic pain medication which you should take as needed and directed. While most of these medications are prescribed to be taken 1 to 2 pills every 4 to 6 hours, you may find it better to take 1 pill every 2 to 3 hours if the effects start wearing off too soon. However, do not exceed the prescribed amount per day.
- As your pain decreases, you may switch to over the counter Tylenol (acetaminophen). Keep in mind that you should not take more than 4000 mg of acetaminophen per a day. Your narcotic medication may also contain acetaminophen so you need to be aware of your total dose from all the medications you are using.
- Ibuprofen (ie-Advil, Motrin) or naproxen (Aleve) may be started the same day as your surgery and may be used together with your narcotic pain medications and with acetaminophen. However, do not use ibuprofen or naproxen if you have had problems with stomach ulcers, kidney problems or if you have been told by a doctor not to use nonsteroidal anti-inflammatory drugs (NSAIDs).
- You may also be prescribed a muscle relaxant (ie- Valium, Flexiril), which you may use for any break thru pain or abdominal cramps. Take as instructed by physician.
- If you are prescribed an antibiotic, please take them until they are finished. If you have a drain in place, continue taking the antibiotic until the drains are removed.
- Purchase an over the counter stool softener (Metamucil, Colace) while taking narcotic pain medication. This helps avoid constipation.

DIET

- You should resume your normal diet gradually.
- Drink plenty of fluids/ water (eight 8 ounce glasses a day).
- If taking antibiotics, consider eating yogurt daily and for 2 weeks after, to help minimize the effects the antibiotics may have on your intestines.

ABDOMINAL BINDER (GIRDLE) and COMPRESSION GARMENT

- If you have a tight elastic compression garment on, do not remove it until you follow up with your surgeon. You may shower while wearing it, then let it air dry or use a hand held hair blow drier.
- If given an abdominal binder/girdle, wear for at least 2 weeks.
- You may remove the binder/girdle to shower and for 1 hour per a day while laying down.
- You may experience some dizziness or feel lightheaded when taking off the binder/girdle. Take the binder off slowly and while sitting down. You may need to have someone with you.
- While the binder should be snug, it should not be so tight that it makes it difficult for you to breath.
- If the binder irritates your skin, you may find it more comfortable to wear a light T-shirt under the binder

ACTIVITY

- **IMPORTANT:** To decrease the risk of blood clots after surgery, do not spend time in bed except for when you normally sleep. Except during your normal sleeping time, get up and walk around for at least 5 minutes every hour.
- **SHOWER:** You may shower 1 to 2 days after surgery. DO NOT take a tub bath, swim, or whirlpool for 3 weeks or if there are any openings in the incision.
- **SLEEPING:** For the first week or two, you will need to sleep flexed at the hip with at least 2 pillows behind your knees and/or with 2 pillows behind your back. Keep head and shoulders up at least 15 degrees. You may begin to feel comfortable sleeping on your side and on your stomach side in 3 to 4 weeks.
- For the first few times, you may need assistance getting into and out of the bed/chair.
- You are encouraged to begin walking and resuming light daily activities as tolerated. You will be walking slowly and bent over at the waist for the first few days after surgery; you will slowly begin to walk more upright over the next week.
- Do **NOT** push, pull, or lift anything heavier than 10 pounds (about the weight of a gallon of milk) for 4 weeks.
- Do **NOT** do any strenuous activity or exercise (running, weight lifting, aerobics) for 6 weeks. After you start exercising, go slowly over 1 to 2 weeks until you are comfortable with the exercises.
- Do **NOT** engage in any sexual activity for at least 2 to 3 weeks; resume when completely comfortable.
- Do **NOT** drive or handle heavy machinery while taking narcotic pain medication or muscle relaxant medications.

SCAR MANAGEMENT

See Incision and Scar Care instructions

WHAT ELSE TO EXPECT

- Some pain and discomfort for three to four (3 - 4) weeks, although it should gradually get better from the first two to three (2 - 3) days.
- You may feel a “popping” or “pulling” sensation in your abdomen a few weeks after surgery. This is normal as internal sutures start to dissolve.
- If there are any sutures, they will be removed in one to two weeks after your surgery.
- You may have some numbness in the lower abdomen and around the incision line which will begin to disappear over time. It may take up to 1 year for sensation to return.
- Surgical incisions are usually thin at first, become somewhat thick and red for up to 6 months, and then begin to fade. It usually takes up to or a little more than 1 year before final scar quality is established

WHEN TO CALL your surgeon

- Fever over 100.5 for 2 readings taken 4 hours apart.
- Marked increase in redness, swelling, or pain around incision or drains.
- Any excessive bleeding or drainage from your incisions.
- Pain is not relieved by prescription medication.
- Persistent problems with nausea or vomiting
- **CHEST PAIN** or **TROUBLE BREATHING:** CALL 911 or go to an Emergency Room