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**AFTER CARE INSTRUCTIONS for BRACHIOPLASTY and/or THIGH LIFT**

**MEDICATIONS**

- You may be prescribed narcotic pain medication, which you should take as directed and as needed for pain. Do not exceed the prescribed amount, unless instructed by your surgeon.
- Wean yourself off narcotic medication as soon as you are able.
- Take over-the-counter Tylenol (acetaminophen) on a scheduled basis (Ex.: 650mg every 4 hours, or 1000mg every 6 hours) starting on your day of surgery. *If you have liver problems, do not take acetaminophen, unless you have discussed this with your doctor.*
- DO 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 medications you are using.
- You may also be prescribed a muscle relaxant (ex.: Valium, Flexeril), which you may use for muscle cramping or spasm. Do not take these medications at the same time as your narcotic pain medicine. Take as instructed by your physician.
- 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/or 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).*
- Wean yourself off acetaminophen and/or ibuprofen/naproxen as soon as you are able.
- Purchase an over-the-counter stool softener (Metamucil, Colace) to use while taking narcotic pain medication. This helps avoid constipation.
- You may resume taking your routine medications, unless your physician instructs you differently.
- 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.

**DIET**

- You should resume your normal diet gradually.
- Drink plenty of fluids/ water (eight 8-ounce glasses a day).
- Do NOT drink alcohol for 24 to 48 hours after surgery, or while taking narcotics or muscle relaxants.
- If taking antibiotics, consider eating yogurt daily and for 2 weeks after, to help minimize the effects the antibiotics may have on your intestines.

**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. Your surgeon may instruct you to remove the garment prior to showering.
- Wear your compression garment for 4 weeks, and as needed for comfort after that.
- You may remove the compression garment to shower and to wash the garment as needed, after approval by your surgeon. You should replace the garment immediately.
- You will need help removing and replacing the garment the first few times. You may experience some dizziness or feel lightheaded when taking off the garment. Take the garment off slowly and while sitting down. While the garment should be snug, it should not be so tight that it makes it difficult for you to breathe.

- If the garment irritates your skin, you may find it more comfortable to wear a light T-shirt under the binder or pad the irritated areas with something *clean* and soft (such as fuzzy socks).

## ACTIVITY

- **IMPORTANT:** To decrease the risk of blood clots after surgery, you should walk regularly, and flex your calf muscles. Except during your normal sleeping time, get up and walk around for at least 5 minutes every hour.
- **ELEVATION:** Keep your arms or legs elevated whenever possible to reduce swelling.
- **SHOWER:** You may shower 1 to 2 days after surgery. Do **NOT** soak, take a tub bath, or swim for 4 weeks, or if there are any openings in the incisions.
- **SLEEPING:** Sleep in a comfortable position.
- The first few times, you may need assistance getting into and out of the bed/chair.
- You are encouraged to **begin walking the evening of surgery**. While sitting or lying down, alternate moving your ankle up & down several times each hour to help with circulation (flexing your calf muscles).
- You may resume light daily activities as tolerated.
- 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 strenuous activity or exercise/ activities (running, weightlifting, aerobics, vacuuming) for 4 weeks. When you start exercising, go slowly over 1 to 2 weeks until you are comfortable with more strenuous 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 narcotics or muscle relaxant medications.

## SCAR MANAGEMENT

See Incision and Scar Care instructions

## WHAT TO EXPECT

- Some pain and discomfort for 3 - 4 weeks, although it should gradually get better after the first 2 – 3 days.
- You may feel a “popping” or “pulling” sensation in your arms or thighs a few weeks after surgery. This is normal as internal sutures start to dissolve.
- If there are non-absorbable sutures, they will be removed in 1-2 weeks after your surgery.
- You may have some numbness around the incisions which will resolve as you heal. 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 weeks, and then begin to fade. It can take more than 1 year before final scar quality is established.

## WHEN TO CALL DR. GUTOWSKI or DR. MARTIN

- Fever over 100.5° F for 2 readings taken 4 hours apart.
- Marked increase in redness, swelling, or pain around incision.
- Any excessive bleeding or drainage from your incisions.
- Pain that 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