

Plastic Surgery by Bram Kaufman, MD, FACS

Experience & Compassion

216-778-4450 Office 216-778-7800 After Hours

Post-Operative Instructions for Breast Reduction

DIET:

Most people can resume a normal diet the evening of surgery. If you feel queasy or nauseated, start with clear liquids or soup. Advance your diet as tolerated to a regular diet. You may experience some constipation as a result of the pain medication. I recommend a trial of over the counter laxatives such as Milk of Magnesia. If this is not sufficient, then a dulcolax tab or suppository may be necessary.

ACTIVITY:

I encourage you to be as active as possible in the first few post-operative days. Walking in the first few days is fine. Mild physical exercise can be resumed as soon as you are able, but I encourage you to refrain from high impact or heavy exercise until we discuss it at your first post op visit.

WOUND CARE:

Leave all dressings and the surgery bra in place for two days. After 2 days you may remove the gauze and bra for a brief period of time and for a shower. Following the shower put the surgery bra and any necessary gauze back on as you found them after surgery.

Any residual surgical soap (yellow) or marker can be gently removed with rubbing alcohol.

Swelling, bruising, redness and of the skin is normal and will resolve over time. Many patients have drainage from the bottom of the breasts were the incisions often come together. This drainage is quite normal and may be bloody, yellow or clear in color.

BATHING:

Showers can be taken after two days. Remove the surgical bra and dressings for the shower and replace the bra and other dressings after drying.

PAIN CONTROL:

Take the narcotic pain medicine and muscle relaxant medication as instructed and needed. Do not drive until you are no longer taking the narcotics and are free of

significant pain. In two days it is <u>recommended</u> that you take 600-800 mg of <u>Ibuprofen</u> (Motrin, Advil etc.) every 6-8 hours as needed. This will help with the swelling and pain.

You may experience some constipation as a result of the pain medication. I recommend a trial of over the counter laxatives such as Milk of Magnesia. If this is not sufficient, then a dulcolax tab or suppository may be necessary.

EMERGENCIES:

If there is a problem, please call me, my office or the resident on call. Most issues are easily addressed and do not require significant intervention.

The most common emergencies that might need attention are:

Nausea that lasts 4 hours or more and does not respond to medication Bleeding that is persistent and uncontrolled Sudden enlargement and/or pain of one side with bruising High fever lasting more than a few hours and not responding to medication Shortness of breath Chest pain that is considerably worse on one side Leg swelling

If you feel the situation is urgent, call 911 and/or proceed directly to the closest emergency room. Please call us as well.

FOLLOW-UP:

Follow-up is typically in 7-10 days and should be scheduled by calling Dr. Kaufman's office at 216-778-4450 if it has not already been arranged.

Bram R. Kaufman, MD Assistant Professor of Plastic Surgery Metrohealth Medical Center Case Western Reserve University

Phone: 216-778-4450 Evening: 216-778-7800