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# BREAST AUGMENTATION/ REMOVAL & REPLACEMENT OF IMPLANTS AFTER-CARE INSTRUCTIONS

#### **INTRO:**

Congratulations on your decision to get breast augmentation. These after-care instructions, along with our office staff, will help guide you through your recovery process. It is crucial that you and your caretakers **read through these instructions both BEFORE AND AFTER SURGERY.** 

# **HAVE CARETAKER WITH YOU:**

• Following surgery, have an adult caretaker stay with you for the first 24-48 hours. You will be drowsy from the anesthesia and will not be able to drive for at least 24 hours.

## **WALKING:**

- It is imperative to get out of bed early, and often (with assistance) following surgery to prevent postoperative problems such as blood clots. A reasonable goal would be to go for a 15-minute walk 5-6 times per day or to get up every hour to walk to the restroom. This will help reduce the risk of blood clots developing by encouraging blood flow throughout your legs.
- If you are sitting or lying down, move your ankles up and down and in a circular motion a couple times each hour to help increase blood flow.
- If you have shortness of breath, leg swelling, and/or leg pain at any point in your postoperative healing, go to an emergency department immediately (or call 911). This could possibly be a blood clot.

## **COMPRESSION GARMENTS:**

- You will be provided with compression stockings that should be worn for the first 3 days in order to help prevent blood clots in your legs.
- A surgical bra will be provided and must be worn 24/7 for the first 3 days.
- You may then switch to a postoperative bra (one with a front zipper or hooks) for the next 8 weeks. After 8 weeks, you may resume the use of a regular underwire or wireless bra.
- It is helpful to purchase an additional garment to wear while washing the soiled garment.
- Post-operative bras can be purchased at any medical supply store or online at <a href="www.marlahope.com">www.marlahope.com</a> or <a href="www.marlahope.com">www.marlahope.com</a> <a href="www.mar

#### **SHOWERING:**

- You can shower 3 days after surgery (no baths).
- Remove all garments and dressings. You can wear an old belt in the shower to hang your drains
- Keep your back to the showerhead to help protect surgical area from direct water pressure for the first few showers
- After showering, carefully pat dry or air dry your body.
- Apply new non-stick pads to the surgical area and put on post-operative bra.
- Make sure someone is with you for your first shower.

## **PAIN AND PAIN MEDICATION:**

- Take pain medication with food.
- Vicodin (Hydrocodone + Acetaminophen) or Percocet (Oxycodone + Acetaminophen) should be taken as directed:
  - Mild to moderate pain: 1 tablet every 4-6 hours
  - Severe pain: 2 tablets every 4-6 hours
- If your pain is mild, you may opt to take Tylenol (Acetaminophen) 1000 mg every 8 hours (which is 2 tablets of the Extra Strength Tylenol purchased over-the-counter).
- Take a stool softener, such as Colace, while taking pain medication to help prevent constipation.
- DO NOT DRIVE WHILE TAKING PAIN MEDICATION.
- DO NOT DRINK ALCOHOL WHILE TAKING PAIN MEDICATIONS.
- Take pain medication only if needed. The quicker you can wean off the pain medications, the better you will feel and heal.

#### **SUPPLEMENTS:**

- Do not take aspirin (or products containing aspirin) for 10 days after surgery
- Do not take herbal supplements (vitamin E, fish oil, hormone replacements) for 10 days after surgery.
- Phentermine or appetite suppressants should not be taken until 6 weeks after surgery, since they increase heart rate and blood pressure which could interfere with your recovery.

## DO NOT SMOKE:

- This is very important because smoking (tobacco, marijuana, or vapes) can result in a lack of blood supply to the tissues and fat, causing the tissue to die or delayed healing.
- Smoking can resume 4 weeks after surgery as long as there are no other complications present.

#### **DRAINS**

- If drains were placed, please keep a schedule and record the amount of drainage over a 24-hour period.
- Depending on how much drainage you have, you can empty the drains 3 times a day (every 8 hours) or twice a day (every 12 hours).
- After emptying drains, use a Q-tip to apply Neosporin or Bacitracin once or twice a day to where the tube enters the skin.
- It is normal for the drain sites to "leak" fluid at first, and you can put sterile surgical pads to collect extra fluid. It is normal to see "clots" of blood in the drains.
- It is normal to have one drain site to sting or be sorer than the other one.
- You will see more drainage if you overdo activities.
- The drains can be removed when the drainage is 25 cc or less in 24 hours (usually occurs in 7 -14 days).

## **POSITIONING/SLEEPING:**

- Do not lift anything heavy and keep arm movements to a minimum. Do not use your arms to support your body or push yourself out of bed.
- The first 3 weeks after surgery it is crucial to not lift your arms above your shoulders, and not lift heavy objects.
- It is helpful to keep your elbows by your side for the first 3 weeks.
- You will need to sleep on your back, with your head being raised to at least a 30° angle for 1 week following surgery. After 1 week, you may sleep flat on your back.
- You can sleep on your side 6 weeks after surgery. Stomach sleeping is discouraged.

# **LUNG EXERCISES**:

- You will be given a spirometer to help increase volume in your lungs to prevent atelectasis, or collapsed lungs, which can be a result of anesthesia and the physical stress your body is going through. It is best to take 10 breaths per hour with the spirometer for the first 72 hours.
- Remaining hydrated (64 oz of water per day) and regular walks will also help to prevent these occurrences.

## **DIET:**

- A light diet is best after surgery. Start with liquids and progress to soft foods like soups and Jell-O.
- Stay on a soft diet with high protein for 2-3 days following surgery. Avoid spicy foods, sugar-free sweeteners and carbonated drinks to reduce gas, bloating and nausea.

# **ACTIVITIES**:

- Driving may be resumed when you can sharply turn the steering wheel without pain (usually 5-7 days), and you are no longer taking narcotic pain medication.
- Refrain from raising blood pressure for three weeks after surgery to prevent bleeding.
  - o No hot baths, showers, spas for the first three weeks.
- Cardio exercise, swimming, and inactive sexual activities may resume 3-4 weeks following surgery. If running, please wear 2 sports bras.
- Upper body exercise may begin after 6 weeks. Avoid pectoralis muscle use (e.g. pull-ups, push-ups)
- Do not lift anything over 10 lbs. for 6 weeks (a gallon of milk weighs approximately 8.5 lbs.)
- After 12 weeks, you may ease into all exercises including pectoralis muscles.

## **BREAST EXERCISES:**

- Massage of breast implants should start 3 weeks after surgery. These exercises will help prevent the development of capsular contracture (scar tissue that forms around implant).
- The exercises should be performed 3 times daily for the first 6 months, then twice daily for the next 6 months, and once a day through out the lifespan of your implants.
  - O Cup your hands over the top of your breasts, either one or both at a time. Push downwards for a few seconds, release and repeat. Do the same maneuver, but this time push the breast upward.
  - Push your breasts toward the middle of your chest by placing your hands on each side. Hold for a few seconds and repeat.
  - Push your breasts toward the middle of your chest, this time with the opposite hand (crisscross them below your breasts). Hold and repeat.
- One exercise is 10 times on each side.
- We will demonstrate for you at your 3-week follow-up appointment.

# **SUTURES/SCAR TREATMENT:**

- The sutures will dissolve over the next 7-12 days and it is important not to tug on the them.
- If they become uncomfortable, you may have them trimmed at your 1-week follow up appointment.
- At 4 weeks, you can begin using silicone scar patches from the drugstore, or Silagen<sup>®</sup> Scar Refinement System that we sell in the office on incision sites. Silagen<sup>®</sup> will help flatten and soften scars and reduce redness, itching, and pain on incisions.

# **EXPECTATIONS:**

- Numbness, sharpness, burning and shooting pains at the breast or underarm areas are common during the healing process. These sensations can radiate down your back and even your arm. This is expected and normal.
- These sensations may last several weeks and will gradually disappear.
- Moderate breast swelling is normal and will gradually subside within 3-6 months. Swelling is at its worst at 3-5 days and will start to subside at 6 weeks.
- Bruising is to be expected and will improve over the next 3-4 weeks.
- You might initially feel like your implants are too high, too flat, or too large. This will resolve over the next 4-6 weeks post operatively.
- It will take 6 months to see final results. It is common to see incision asymmetry, breast asymmetry, nipple and areolar asymmetry, day-to-day swelling and breast shape changes, hardness and pleating along incision lines, and numbness from nerve regrowth until you are fully healed.

## **FOLLOW-UP APPOINTMENTS:**

- Every patient heals at different rates, but you will be seen several times for post-op appointments. Typically, they are scheduled for day one, 1 week, 2-3 weeks, 6 weeks, 3 months, and 6 months after surgery.
- The purpose of these appointments is to check your healing progress.
- Please call to schedule your appointments. The Beverly Hills office phone number is (310) 273-1001 and the Santa Barbara office phone number is (805) 898-9299.

# **QUESTIONS & CONCERNS:**

- If you have questions or concerns regarding your procedure please email assistant@drbrent.com or email Dr. Brent Moelleken at drbrent@drbrent.com
- Please call the office at (310) 273-1001 if you have increased pain at surgical incision sites, redness, sudden swelling, warmth, pus, drainage, or a fever greater than 101.5°F.
- Please visit an emergency room or call 911 if you have shortness of breath or leg swelling with pain to rule out a pulmonary embolism or blood clot which could be deadly if left untreated.