

## Most common questions and major risks of surgery

- The overall down time for most procedures is about 1 week, related to swelling of the affected tissues, some blurry vision (from eye ointment and the surgery itself), and/or post-surgical discomfort. To avoid bleeding and increased swelling after surgery, some **restriction of activities will be needed for 2-3 weeks**, including no lifting anything greater than 20 pounds, and avoiding any bending and straining as able.
- Swelling and bruising usually resolves in about 2 weeks for most individuals. You may notice fluid and bruising travelling down the face, which is normal, as these need to drain down towards the neck area.
- Blurry vision from surgery may be due to swelling around the eyes, ointment being placed in the eyes, and in some individuals, exacerbation of dry eye. Though most of those with increased dry eye after surgery do recover, those with moderate to severe preexisting dry eye may require additional lubrication or treatment for dryness afterwards.
- Major bleeding after surgery is extremely uncommon, though mild bleeding characterized by blood tinged tears and oozing of blood can occur and usually resolves within a couple days and/or with firm pressure for 10-15 minutes at a time. Applying pressure significant enough to cause eye pain should be avoided. Some blood breakdown may occur 5-7 days after surgery and will look like bleeding but is the natural degradation of clots. The risk of vision loss due to severe bleeding behind the eye is rare, reported to occur in 1/10,000.
- Itching may occur and commonly will happen a few days after surgery as blood breakdown products cause irritation, in addition to the body's natural reaction to any sutures placed. Any unusual itching and redness/swelling can on occasion be due to an allergic reaction to your eye drop and/or ointment. Be sure to contact your physician if this happens.
- The risk of infection is low around the face, and especially the eyelids, because the blood supply to these areas is extensive. If occurring, infections typically occur in the first few days after surgery and can include purulent (not mucus) discharge, firm or tender swelling and redness, and fever. Let your physician know about these symptoms immediately.
- Although extremely uncommon, any surgery around the eyes potentially can result in vision loss, most often due to accident injury to the eye itself. This occurs at a rate of approximately 1/40,000.
- **Avoid any blood thinning products** including aspirin, warfarin, plavix, eliquis, advil, alleve, and/or any non-steroidal anti-inflammatory drug or other similar blood thinning product at a minimum of 1 week prior to surgery. Some modification of when a blood thinner can be stopped is okay depending on how critical it is to continue the medication, based on your medical history. Please consult with your primary care provider before stopping these medications, and if there is an issue about the duration of how long to hold a blood thinner, please let your surgeon know in advance by at least 1.5 weeks or more. On rare occasion, temporary anticoagulation with short duration injectable blood thinning shots may need to be used before and after the surgery as bridging therapy. Over the counter herbal/vitamin/oil products should also be held for at least 2 weeks prior to surgery.
- To enhance wound healing and decrease the risk of cardiac and pulmonary problems, it is critical to **stop smoking** well before surgery. Ideally, the greatest effect occurs when one quits 8 weeks before

surgery. After surgery, one should either stop smoking or at least avoid smoking for another 8 weeks minimum. The same goes for any illicit substances.

- Alcohol should be avoided a week prior and after surgery, as it can increase your risk of bleeding.
- Please avoid any strenuous activity 24 hours prior to your surgery as this can cause dehydration and transient cardiovascular changes which may affect bleeding and anesthesia induced nausea/vomiting.
- If you have had adverse reactions to anesthesia, topical ointments, pain medication, antibiotics, scarring, bleeding, and/or other postsurgical problems, please inform your physician. Also inform your doctor if you have a history of motion sickness or nausea/vomiting after surgery.

## Postoperative

- Instructions given after surgery are guidelines, and in general should be followed strictly.
- Activity restrictions are given to decrease the risk of bleeding and swelling. Total avoidance of activity is not recommended, and light activity like walking is encouraged.
- **Other recommendations are provided to enhance recovery, especially swelling and bruising.** These include icing, warm compresses, elevation of the head of the bed, a balanced diet, and avoidance of salt and MSG. The ultimate outcome is the same with or without these measures, though recovery is prolonged. If, for example, it is difficult to elevate the head of the bed, one can safely avoid doing so as it is better to balance comfort and rest with active interventions to resolve swelling.
- **We offer a pre and postoperative recovery and treatment kit that can help optimize your surgical recovery. It can be purchased in the office.**
- In general no patches are placed. When used they are added to help decrease swelling and bleeding, typically removed after 24 hours except in cases of grafts or enucleation/evisceration surgery.
- It is okay to wash the face area after surgery but avoid direct water to the surgical area and/or eye(s). To clean the surgical area, use a clean wash cloth and lay on top of the affected areas while avoiding any rubbing. Let any material soften and get absorbed onto the wash cloth so that it can lift or come off. Do not pick at anything or try to brush anything off, as one can mistake a suture for a scab or the wound can come loose. Indirect water, for example, when water spills downward while shampooing the hair, is ok, just dab the surgical area and pat dry, **DO NOT RUB.**
- In general it is ok to resume make-up and contact lenses 2 weeks after surgery, but confirm with your doctor before resuming.
- While it is fine to resume most facial lotions and/or creams the day after surgery, avoid any products containing retinols, retinals, retinoic acid, and/or other acids or scrubs. Make sure to apply any product by dabbing and patting in, not rubbing. Confirm with your doctor if unsure. Also avoid any chemical peels or special topical face/neck skin treatments for 6 weeks after surgery.
- Unless specifically instructed, no dressing is needed over wounds. Sutures that are non-absorbable and removed in the office will be blue/black, while absorbable sutures are typically gold/brown/purple colored and dissolve over 2-3 weeks.
- Most questions or issues after surgery can be greatly helped with a photograph, especially a good quality cell phone picture. Take one of the full face and also the area in question with good lighting. **If there are any serious problems or concerns after surgery please do not hesitate to contact your physician, we can be reached 24 hours a day.**