Jeff M Robichaud, Medicine, Professional Corporation Bsc MD FRCSC, DABOto Assistant Clinical Professor McMaster University Otolaryngology- Head & Neck Surgery Practicing in Facial Plastic Surgery

> 23 Hannover Drive. Unit # 5 St Catharines, ON L2W 1A3 Phone: 905-685-0267 Fax: 905-685-0265 info@niagararhinoplasty.com

Rhinoplasty with or without Septoplasty and Turbinate Reduction.

<u>Before the operation</u>: (please see video animation on website <u>www.niagararhinoplasty.com</u> under face procedures)

2 weeks before the operation you should not take any ASA. Non-steroidal anti-inflammatory medications such as Motrin, Ibuprofen (Advil), Naproxen or any medications containing these drugs can be taken up to five days preoperatively. Celebrex and Mobicox may be taken up to the day prior to surgery. All herbal medications should also be avoided as they can interfere with normal blood clotting and anesthetic agents. If you take pills for high blood pressure, you should still take them the morning of surgery with sips of water. One of the risks of the surgery is post operative bleeding which will be less likely if these instructions are adhered to. There are many new blood thinners now being used which each have a different duration of effect. Please make certain you review this with the office, so you are only off of them the appropriate amount of time.

Patients may attend a pre-operative tour at the hospital where blood work and pre-operative testing will be done if any has been ordered. Most healthy patients do not require a pre-operative appointment and will receive a reminder phone call or email to confirm surgery 2-3 weeks in advance. Photos are generally taken at the initial consultation and then one week and 3 months post operatively.

After the Operation:

You will be discharged the same day of the operation. You should have someone with you the first evening. It is normal to have some blood come from the nose for up to 2 weeks after the operation. You should not have brisk nasal bleeding. Blowing your nose should be avoided for at least 3 days, and then only gently afterwards for 2 weeks. Your upper teeth may be a bit sore which is temporary and will resolve in a few weeks to months depending on how much surgery was necessary in the area called the maxillary crest of the nose. This is a small bone located just above the upper central teeth. If you develop thick green or yellow nasal discharge following

surgery, you should contact the office before your follow up. On weekends or evenings, you may need to go to a walk-in clinic or Prompt care center for treatment.

Blood thinners should not be resumed if there is any active bleeding.

There may be nasal stents called Doyle Splints in the nose to help support the repaired septum after the operation. These are removed 2-7 days after the operation. Follow up is generally 7-8 days post operatively for cast removal if present. You will be given your follow up appointment at the time of discharge after surgery. The office can be reached at our phone number above, or by email at info@niagararhinoplasty.com to if you need to change your follow up appointment.

You should not use your steroid nasal spray for 3 weeks after the surgery while things heal. It is recommended that you use a Saline Nasal Spray or Hydrasense medium nasal spray for the first five days post op. You will then use Neilmed Sinus rinse spray two or three times daily for up to 3 months after surgery. Most patients need about 2-3 weeks off for a rhinoplasty to allow the bones to settle. This can be longer if you work in an industrial environment or are required to do heavy lifting at work. You may have a small incision at the nasal tip near the upper lip. The sutures will dissolve on their own in 7-10 days. We recommend **Skinuva** cream be applied to this starting ten days post op for optimal healing. This is available in the office.

There can occasionally be adhesions that develop in the nose that are easily divided in the office on follow up if needed. You should expect some temporary relief after surgery followed by some ongoing nasal congestion for a few weeks with progressive improvement as the intra nasal swelling, from the surgery, resolves. This operation does not treat sinus infections but is primarily aimed at improving nasal breathing. This can have the added benefit of treating snoring, loss of smell and taste, and in some cases sleep apnea.

It is quite normal to have swelling in the nasal tip and dorsum after surgery that can take up to a year to completely resolve. Most of the swelling is gone at three months out from the surgery. When the cast is removed you will see the nasal shape, but the nose is still very swollen. 95% of bruising is resolved by 2 weeks. There is no exercise restriction at two weeks post op, but you may still feel some discomfort with impact exercise for up to 6 weeks. It is recommended you avoid wearing glasses for up to 5 weeks after the surgery if possible.

Pain Management After The Operation:

You will be provided some Tylenol 3 or Percocet but should try to use extra strength Tylenol or Celebrex as primary management for the first 2-3 days. Once bleeding is minimal Advil or Motrin are excellent options as well and can be used safely.