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Pre-Operative and Post-Operative Guidelines

In an effort to prepare you for your upcoming procedure, we've created a list of pre-operative and post-operative guidelines for you.

PRE-OPERATIVE GUIDELINES:

We recommend that you adhere to the following pre-operative guidelines:

- **STOP SMOKING** AT LEAST ONE (1) MONTH PRIOR TO SURGERY and at least two (2) weeks AFTER surgery. Smoking reduces circulation to the skin, impedes healing, and can lead to major postoperative complications.
- **STOP** contraceptives or hormone replacement therapy for at least one week before surgery and one week after surgery. These substances can increase your risk of blood clots (even if you are not undergoing surgery).
- **DISCONTINUE MEDICATIONS CONTAINING** aspirin, ibuprofen, blood-thinners, Vitamin E, and ALL herbal supplements at least 2 weeks prior to and 1 week after surgery. These medications can cause increased/prolonged bleeding. Tylenol is safe to take just before and after surgery, if needed. Never take Tylenol and Norco together.
- **REPORT ANY SIGN OF A COLD OR INFECTION** that appear the week prior to your surgery. You may need to postpone your procedure to avoid unnecessary complications.
- **FILL YOUR PRESCRIPTIONS THE BEFORE SURGERY** and keep them at your bedside at home along with a notepad to help keep track of the medications you have taken. Expect some forgetfulness up to thirty-six (36) hours post-op and during narcotic use; thus always have a responsible adult present with you during these times. Also, have food in your stomach before you take your medications to minimize any nausea. DO NOT drive or drink alcohol when taking narcotic pain medication.
- **CONSTIPATION CAN OCCUR FOLLOWING SURGERY.** General anesthesia slows down the gastrointestinal tract and narcotic pain medication increases the likelihood of constipation. It is okay to take a stool softener (such as over-the-counter Colace) or fiber bulkers (such as Metamucil or Fibercon) following surgery. Drink lots of water and be sure to eat a well-balanced diet including fruits and

vegetables the days before and after surgery. Also, used any prescription medications to treat constipation as prescribed.

- **WOMEN MAY EXPERIENCE A CHANGE IN THEIR FIRST MENSTRUAL CYCLE FOLLOWING SURGERY.** It may be lighter and shorter. Menstrual irregularity usually lasts just one cycle.
- **DO NOT EAT OR DRINK ANYTHING 8 HOURS PRIOR TO YOUR SCHEDULED SURGERY TIME (except for certain medications, such as blood pressure medications; please clarify this if you have any questions).**
- **ARRANGE FOR A RESPONSIBLE ADULT TO TAKE YOU HOME AND STAY WITH YOU FOR 24-28 HOURS** after surgery. Although everyone heals differently and has varied pain thresholds, expect some soreness, fatigue, mood swings and some foginess for a minimum of 1-week post-op.
- **SWELLING & BRUISING** typically peaks at day 3-5 post-op during the normal healing process. Arrange childcare if possible, and plan to be off work until you are feeling better, and your doctor says it is safe to resume your activities.
- PLEASE CALL IF YOU HAVE **ANY** QUESTIONS. We are all here to make your surgical experience as comfortable as possible.

WARNING ABOUT BLOOD THINNING MEDICATIONS

Blood thinning products can cause excessive bleeding during and after surgery. Both prescription and over the counter medications can have blood thinning properties. If you currently take any of the medications or herbal preparations listed below, make sure you discontinue use 2 weeks prior to your procedure. Remember this is only a partial list. If you have any questions, please contact your local pharmacist.

If you were told by a doctor to take a blood thinning medicine on a regular basis for stroke or heart attack prevention, severe arthritis, atrial fibrillation, or a prosthetic heart valve, ask your surgeon when this medicine should be discontinued.

Read the labels on all the medications that you take on a regular basis. Many products contain Aspirin (ASA or acetylsalicylic acid) and must be stopped 7 to 14 days prior to surgery.

Read the label on any new medications you take during the 14 days prior to your surgery. Many headache, cough, and cold remedies contain Aspirin (ASA or acetylsalicylic acid) and should not be used.

Below is a list of medications that must be stopped for the 14 days before surgery:

- **Aspirin (ASA or Acetylsalicylic Acid)**
- **Ticlid**
- **Coumadin**
- **Garlic**
- **Gingko**
- **Ginseng**
- **Heparin**

- **Ibuprofen**
- **Lovenox**
- **Naproxen**
- **Plavix**
- **St. John's Wort**
- **Vitamin E**

If you need pain, headache, cough, or cold medicine during the 7 to 14 days prior to surgery, you may take products containing Acetaminophen (Tylenol).

THE DAY OF YOUR SURGERY

Keep the following tips in mind for the day of your procedure:

- **PLAN TO WEAR LOOSE FITTING CLOTHING** (such as a jogging suit or robe) and easy on/off shoes. A top with front zipper closure or buttons works well if you are having upper body surgery. A gown and or house slippers works as well.
- **DO NOT WEAR ANY MAKE-UP, JEWELRY, OR BRING VALUABLES** on the day of surgery, except your ID and insurance card. You may wear socks in the operating room and wear underwear IF it does not interfere with your surgical site and your physician approves. Please remove all JEWELRY prior to your surgery, including, but not limited to rings, watches, earrings, nose piercings, tongue piercings, and naval piercings. If this is not possible, you must discuss this with your surgeon.
- **YOU WILL BE ASKED TO CHANGE INTO A GOWN.** Your surgeon will mark the surgical sites and review your consents and procedure with you. Your anesthesia provider will have you sign a consent form for anesthesia.
- **AN IV WILL BE STARTED IN YOUR HAND OR FOREARM** in the pre-op area and a nurse will accompany you in the operating room, and throughout your surgery and in the recovery room.
- **ONCE YOU'RE IN THE OPERATING ROOM** you will be asked to lie on the table. The anesthesia provider will give you medication through your I.V. to relax you as soon as you are lying down.
- **MONITORS AND EQUIPMENT** will be applied to your body. This may include a blood pressure cuff on your arm, a pulse oximeter on your finger, EKG pads on your torso, TED hoses and SCD pressure stockings to your calves (to reduce blood clots), etc.
- **YOU WILL DRIFT OFF TO SLEEP VERY COMFORTABLY.** A tube will be placed in your throat AFTER you are asleep and will be removed BEFORE you wake up. The only awareness you may have of the tube could be a sore, scratchy throat following surgery. If your surgery is planned for more than 3 hours, you may also have a FOLEY CATHETER in your bladder. This will also be inserted AFTER you are asleep and removed before you wake up. You should be able to urinate normally after its removal.
- **YOU WILL BE TRANSFERRED TO THE RECOVERY ROOM ON A BED** and can expect to stay in recovery for about 1 hour. Most patients are fully awake with 15-60 minutes after surgery but may not remember much due to the anesthetic drugs. You will be released when your vital signs are stable, you are awake, and you meet discharge criteria. A nurse will be with you while you are recovering.

- **YOU AND A RESPONSIBLE ADULT WILL BE GIVEN SPECIFIC DISCHARGE INSTRUCTIONS PRIOR TO SURGERY**, necessary supplies, and a 1–3-day post-op appointment. **Ask questions anytime. These instructions will be reviewed with you on multiple occasions.**

MOST IMPORTANTLY, REMEMBER TO LISTEN TO YOUR BODY...Rest when you feel pain or fatigue.

BE PATIENT with the healing process and remember you may have good and bad days.

To ensure proper healing and the best possible results, it's important that you adhere to the following post-operative guidelines:

POST-OPERATIVE GUIDELINES:

Planning your procedure will be an effort that our staff will carefully guide you through. It is important to recognize that everyone will recover at a different rate so be sure you set aside adequate recovery time from work and strenuous activity to allow your body to heal. This will ensure a smooth recovery and a more rapid return to normal activities. It is also important to have a supportive care group around you, especially during the initial 24-72 hours after surgery. Many patients find it beneficial to have additional help with daily activities for the first 2-3 days after their procedure.

- **TAKE YOUR MEDICATIONS AS DIRECTED.** Pain tolerance varies from one person to the next. Stay on top of your pain by taking your medication regularly for the first few days. Take your medications with food to decrease the chances of nausea.
- **REST FOR THE FIRST 24 HOURS** following surgery. DO NOT drive or drink alcohol while taking narcotic pain medication. You may walk and climb stairs slowly. No heavy lifting or any exercising for a minimum of 4+ weeks and after you are cleared by your surgeon. **LISTEN TO YOUR BODY!** Everyone heals at different rates.
- **YOU MAY SHOWER 48 HOURS AFTER REMOVAL OF DRAINAGE TUBES. DO NOT SHOWER UNLESS ALL DRAINS ARE OUT FOR AT LEAST 2 DAYS AND YOU STOP LEAKING FLUID.** Sponge baths only until this time. Avoid exposing scars to sun for at least 12 months. Always use a strong sunblock if sun exposure is unavoidable (SPF 30 or greater). Keep your dressings on as instructed; whether steri-strips/silicone tape/gauze or other dressing. Keep your incisions and dressings dry at all times. Keep incisions clean and inspect daily for signs of infection. Signs of infection include increasing **redness, pain, drainage, fevers, foul smell**. No tub soaking for at least 6 weeks after surgery. Wear your compression dressings (garment/binder/bra) 24/7 (unless your surgeon tells you otherwise) for 16 weeks post op. Place daily soft dressing over incisions and around drain sites to wick away moisture and to prevent irritation by garment along the incision line.

- **YOU WILL GO HOME IN A PAIR OF COMPRESSION STOCKINGS.** These are elastic stockings that fit tightly around your legs and above your knees. They help keep blood flowing toward your heart by the pressure they apply. They help decrease blood from pooling and forming blood clots. When you first put them on, the stockings may be uncomfortable. But after a while, you should get used to them.
- **GET MOVING AND KEEP MOVING RIGHT AFTER SURGERY.** Blood clots form when blood stays in one place. When you stop moving, blood flows more slowly in your deep veins, which can lead to a clot. When you move your muscles, your blood does not sit still long enough to clot.
- **DO WALK** regularly after surgery. Every time you want to eat or use the restroom, you must have a family member or friend help you to the kitchen or the bathroom. Regular meals in bed are just a bad idea. Walking helps pump blood through your leg veins, preventing clots from forming. Moving around improves circulation and helps prevent blood clots. **YOU NEED TO WALK AT LEAST EVERY 2 HOURS; 24 HOURS PER DAY UNTIL INSTRUCTED OTHERWISE.**
- **SIMPLE EXERCISES** while you are resting in bed or sitting in a chair can help prevent blood clots. Move your feet in a circle or up and down. Do these 10 times an hour to improve circulation.
- **WHEN TRAVELING:**
On flights longer than 2 hours, get up and move around. Take the opportunity to walk and stretch between connecting flights, too. When you're traveling by car, stop every hour to walk around. If you're stuck in your seat, work the muscles in your legs often throughout your trip:
 - Stretch your legs.
 - Flex your feet.
 - Curl or press your toes down.

SPECIAL CONSIDERATIONS AS INDICATED:

- **GARMENTS/BINDERS:** Garments (bras or girdles) help to reduce swelling and promote tissue retraction following surgery. Wear it for about 8-12 weeks, around the clock, under clothing. The garment may be removed for bathing. The garment may also be loosened or adjusted as needed. Hand wash your garment and DO NOT dry it in the dryer. (Bring your second garment to your post-op visit.) Keep any dressings or steri-strips on as instructed.
- **DRAINS:** Drains may be inserted to reduce blood/fluid accumulation at the surgical site. They should be emptied about 4 times per day, and more often if necessary. The bulb should be compressed when emptied, then closed. The tubing can be massaged as needed to maintain potency. Expect some oozing at the tubing insertion site. Gauze can be used to reinforce the site. The drain bulbs can be placed in the pockets of your jacket or safety pinned to your clothing. Drains are typically removed when you're draining below 10ml within a 24-hour period. A drain record should be kept recording the amount of daily output. (Bring the record to your post-op visits.)

Drink plenty of fluids but avoid coffee and alcohol. They'll dehydrate you, which makes your veins narrower and blood thicker, so you're more likely to get a clot.

- **CALL 911 OR THE OFFICE IF YOU EXPERIENCE** ANY shortness of breath, ANY excessive pain, ANY BREATHING DIFFICULTY, fainting, bleeding, swelling, discoloration at the incision site, or fever over 100.4 degrees

Fahrenheit. Remember, scars take a year or more to fully mature. Wear sunscreen (SPF 30) over your scars after they heal. IF YOU HAVE ANY DIFFICULTY REACHING THE OFFICE OR ANY STAFF IMMEDIATELY, CALL 911.

- **ASYMMETRY:** both sides of your body heal differently: One side of your body may look or feel quite different from the other in the days following surgery; or even long term given that almost all of us are asymmetric even prior to surgery. This is expected. However, extreme asymmetry should be reported to Dr. Kohan immediately.
- **STAY HYDRATED:** Drink plenty of fluids but avoid coffee and alcohol. They'll dehydrate you, which makes your veins narrower and may make you more likely to get a clot.
 - **What fluids should I drink after surgery?**: Drinking an abundance of fluids that provide your body with essential electrolytes, Smart Water or any water containing electrolytes during the first few weeks of your recovery. Staying hydrated is necessary after surgery.

Many patients also opt to drink sports drinks such as zero sugar Gatorade or PowerAde for added electrolytes. Other liquids like fruit juices such as pineapple or apple juice are OK to drink too, as long as they are in moderation.

- **EAT CORRECTLY:** Eat nutrient-dense foods that will provide your body with the essential minerals and vitamins needed to support recovery. Add healthy fats and other foods including salmon, avocados, grass fed butter, walnuts (and other nuts), extra virgin olive oil, and coconut oil. Foods high in fiber is an essential ingredient during surgery recovery, as it can help ease constipation, a commonly reported condition after surgery. Constipation isn't just a minor inconvenience during surgery recovery it is a primary cause of long recoveries and may even send patients to the hospital. Whole fruits and vegetables, certain cereals, and whole grains are all great sources of fiber.

However, make sure you save your fruit and vegetable intake for after surgery. During the 24 hours before surgery, patients should avoid foods that are high in fiber. Fruits, vegetables, and whole grains take longer to digest, and it is important to have as little food as possible in your system before surgery begins.

- **HEALTHY FATS** are excellent for your overall wellbeing and important to consume during your recovery period. Especially following surgery, healthy fat helps your body absorb all the vitamins you are getting from your fruits and veggies and provide you with a long-lasting source of energy. Fat is essential for strengthening your immune system, decreasing your chance of infection, helping your wounds heal faster and reducing the appearance of scars.

Some popular **healthy fats include olive oil, avocados, coconut oil, nuts, cheese, dark chocolate, whole eggs, fatty fish, chia seeds, Greek yogurt, tuna and peanut butter.**

- **LEAN PROTEIN** is an important nutrient for supporting body functions like tissue repair, cell maintenance, hormone function, enzymatic reactions, and muscle building. Protein also helps regulate blood sugar and keeps you feeling full, which is why it's important for weight management. Here some great sources of lean protein and how to choose which one is best for you.

- **White Meat Chicken** perhaps one of the most popular sources of lean protein. A 100-gram serving (about 3.57 ounces) of boneless, skinless chicken breast is 109 calories, 22 grams of protein, and 1.6 grams fat (0.4 grams saturated).
- **White Meat Turkey** A 3.5-ounce serving provides about 113 calories, 23 grams of protein, and 1.5 grams of fat (0 grams saturated). Enjoy ground turkey in soup or chili, in a taco or burrito or bowl, or made into burgers, meatballs, or meatloaf.
- **Eggs and egg whites** are a super-convenient and versatile protein source (not to mention affordable) that also provides instant portion control. One large egg contains about 70 calories, 6 grams protein, 5 grams fat (1.5 grams saturated fat). One large egg white provides about 17 calories, 3.6 grams of protein, and 0 grams of fat. Sometimes people are afraid to eat the yolks because they're put off by the cholesterol and saturated fat content, but keep in mind that the yolk is also where you'll find important nutrients like vitamin D and brain-boosting choline.
- **Tuna** which provides 100 calories, 22 grams of protein, and less than 1 gram of fat in a 3.5-ounce serving. Enjoy your fish grilled, baked, steamed, or as sushi and served with your favorite veggies or a salad. Try different sauces and preparation methods if you're just starting to experiment with fish. If you need a good on-the-go option or just don't feel like cooking, pouches of salmon or tuna are super-convenient.
- **Beans, Peas and Lentils** Perhaps the most affordable sources of lean protein are beans, peas, and lentils, which can be purchased dried or cooked. While there may be slight variations in micronutrient content, their nutrient profile is very similar across the board. As a reference, a half-cup serving of cooked garbanzo beans contains 130 calories, 5 grams protein, 1 gram fat (0 grams saturated). A half cup serving of cooked lentils will set you back about 115 calories, 9 grams protein, 0.3 grams fat (0 grams saturated). Though higher in carbohydrates, they are also rich in fiber, so these legumes will digest much more slowly than most grains. Enjoy them in soups, stews, salads, made into burgers or meatless meatballs, or as a base for a veggie bowl.
- **FOODS LOW IN SODIUM:** Lastly, patients should avoid foods that are high in sodium, or salt, during surgery recovery. Salt retains water and can increase a patient's swelling after surgery, which will cause your results to take longer to settle in. To avoid excessive sodium intake, patients should try sticking to whole foods instead of prepackaged foods and avoiding adding too much salt to their meals.

After Plastic Surgery, getting the daily recommended amount of minerals, vitamins and nutrients most beneficial to you during surgery and post-surgical recovery. Your body requires more nutrients after plastic surgery to promote wound healing. Proteins are essential for new blood cell and collagen production. They're also vital to a well-functioning central nervous and immune system.

Good nutrition supports your immune system as it staves off infection, and reduces swelling, pain and inflammation. Arnica, probiotics, glutamine and similar supplements may be continued. Bland, soft easily digested foods should be eaten for up to 72 hours after surgery, as stress typically compromises digestion. Foods high in monounsaturated fats can be eaten, items having extra-virgin olive oil, and foods such as avocado, sour cherries and blueberries. These last have been shown to have significant anti -inflammatory effects.

Anti-Inflammatory Foods Any mainstream nutrition expert would encourage you to eat anti-inflammatory foods. They include lots of fruits and vegetables, whole grains, plant-based proteins (like beans and nuts), fatty fish, and fresh herbs and spices. Fruits and veggies: Go for variety and lots of color. Research shows that vitamin K-rich leafy greens like spinach and kale reduce inflammation, as do broccoli and cabbage; so does the substance that gives fruits like cherries, raspberries, and blackberries their color. Continue avoiding foods having saturated and trans-fats and refined sugars—they can increase inflammation. But three days after surgery, you can resume those supplements you stopped taking before your operation, while continuing to avoid salt, sugar and alcohol.

CALL THE OFFICE IMMEDIATELY (or 911 if you do not receive an IMMEDIATE RESPONSE) IF YOU EXPERIENCE ANY OF THE FOLLOWING:

A Fever, (over 100.4) severe nausea and vomiting, continued dizziness or incoherent behavior, such as hallucinations. Any pain that cannot be controlled by your pain medication. Bright red skin that is hot to the touch. Excessive bleeding or fluid seeping through the incisions or drains. A severely misshapen region anywhere on your abdomen or bruising that is localized to one specific point of the body. Any shortness of breath, difficulty breathing, or calf pain, OR ANY OTHER CONCERNS.

IF YOU HAD AN ABDOMINOPLASTY please note the following:

- **NORMAL SYMPTOMS** of Abdominoplasty and signs to watch for following surgery include the following: Tightness and stiffness in abdomen: Bruising, swelling and redness, tingling, burning intermittent shooting pain.

These are normal experiences as the skin, tissues and sensory nerves heal. Pain medication and muscle relaxants will help you cope with any discomfort. If you have drains, you may experience additional localized discomfort.

Consistent sharp pain should be reported to Dr. Kohan immediately. Skin firmness, hypersensitivity or lack of sensitivity: This is normal and will gradually resolve over time. As the healing process advances, you may also find a mild to severe itchy feeling. An antihistamine such as Benadryl can help to alleviate severe, constant itchiness. If the skin becomes red and hot to the touch, contact our Office immediately. Stay flexed at the hip as instructed to not strain your incision and muscle plication. This will gradually relax over a few days, allowing you to stand straight up.

INCISIONAL CARE: PLEASE CLEAN YOUR INCISIONS DAILY WITH SALINE AND APPLY NEOSPORIN AND GAUZE AS INSTRUCTED. REPORT ANY REDNESS, OPENINGS, OR CONCERNS IMMEDIATELY.

PLEASE WEAR YOUR BINDER AS INSTRUCTED OR UNTIL INSTRUCTED TO USE A COMPRESSION GARMENT.