

of Washington University



1020 N MASON RD STE #110 SAINT LOUIS MO 63141

Office of Dr. Terence Myckatyn & Dr. Marissa Tenenbaum

Nursing Line - 314-996-3201

Surgery Scheduling Assistant for Dr. Tenenbaum	Carol – 314-996-3040
Surgery Scheduling Assistant for Dr. Myckatyn	Michelle - 314-996-3028
Cosmetic Patient Concierge	Kristi – 314-996-8133
West County Plastic Surgeons Nursing Line	314-996-3201
General Questions and Office Appointments	Front Desk – 314-996-8800 Option 2
Surgery DAY/TIME: PLACE:	ARRIVAL TIME:
During office hours, questions can be answered by our office staff at 314-996-8800 . After hours, please call Central Page for the Plastic Surgery Resident ON CALL at 314-362-1242	
Please note that our website (<u>www.westcountyplasticsurgeons.wustl.edu</u>) has detailed descriptions of most procedure	

INVERTED NIPPLE CORRECTION

SIX WEEKS BEFORE SURGERY

- Smoking affects healing. Please stop smoking or ANY nicotine products for as long as
 possible before and after surgery. If needed, we can prescribe Chantix to help you quit.
 Our office may perform a urine nicotine test at any time before your surgery to confirm
 that you have quit smoking.
- Good nutrition can help optimize wound healing and speed your recovery from plastic surgery. To reduce the risk of problems, please be sure to consume a high protein diet and appropriately supplement any vitamin or dietary deficiencies that you may have.

TWO WEEKS BEFORE SURGERY

- 1. Some medications can interfere with anesthesia and cause undesirable side effects that could affect your surgery. Please read over the enclosed "Medication and Supplement Alert List" and let us know if you take any of them. Aspirin should not be taken 2 weeks before or after surgery. Tylenol is a good medicine to take for any aches or pains you may have prior to your surgery.
- 2. If you develop a cold, urinary tract infection, fever or any other illness prior to surgery, please notify us.
- 3. If you are having surgery in our office or as an outpatient, please be sure arrangements have been made for a responsible adult to drive you to and pick you up after surgery.

EVENING BEFORE SURGERY - IF YOU ARE HAVING GENERAL ANESTHESIA:

- 1. Have some jello and/or soup available for after surgery.
- 2. Get a good night's rest.

DAY OF SURGERY

- 1. DO NOT SMOKE.
- 2. Bring a loose fitting top, preferably one that buttons at the front. Bring a surgical bra or a sports bra without an underwire.
- 3. Drink 12 oz of water 4 HOURS before your scheduled surgery time.

AFTER SURGERY

- 1. **Resting position.** While resting, keep your head and shoulders elevated on at least 2 pillows for the first 24 hours.
- 2. **Diet.** You may start a light regular diet if your procedure was performed under local anesthesia. A light diet is best for the rest of the day after surgery if you had general anesthesia for this procedure. If you had general anesthesia, begin by taking liquids slowly and progress to soups or jello.
- 3. **Pain control.** Pain is usually not a major issue with this procedure. However, if you have pain or discomfort, take pain medication every 4 hours. It is best to take pain medication with crackers, jello, etc. If you have no pain, do not take the medication. Alcohol and pain medication should not be taken together.
- 4. **Activity.** For the first 48 hours keep your arm movements to a minimum. Your arms should not be used to support your body or to lift anything heavy.
- 5. Dressings. We will put bulky dressings to surround and protect your nipples. This may include a medicine cup and suspension sutures that maintain projection of your nipples. We may request that you wear this specialized dressing for up to 1 week following your procedure.

6. **Showering.** You may shower the day after surgery. The incisions can get soapy and wet, but avoid applying full showerhead pressure to them. Avoid soaking under water in a tub or pool.

OTHER POST-OPERATIVE INSTRUCTIONS

- 1. You may gradually resume normal daily activities after 24 hours, being careful to avoid any activity that causes pain or discomfort. Strenuous activities and exercises are to be avoided until 2 weeks after surgery. At that point, you may perform non-impact aerobics like the elliptical, stairmaster, arc trainer, or stationary bike. Running, impact aerobics, and light upper body work can start at 3 weeks after surgery depending on your comfort level. Start slow and progress as tolerated. Call your doctor if you have any questions.
- 2. Driving may be resumed within hours of inverted nipple correction surgery.
- 3. Mild bruising and swelling are normal. The nipples may have some purplish discoloration for one to two weeks after surgery. These will improve with time.
- 4. If you have any questions, sudden onset of extreme pain, fever, or redness, please call Dr. Myckatyn or Dr. Tenenbaum's office at 314-996-8800.

RETURNING TO WORK:

1. Working from home: 1 day

2. Desk job: 1 day

3. Up on your feet a lot: 3 days4. Manual labor: 2 to 3 weeks

GENERAL INFORMATION:

- 1. Strenuous activity/heavy lifting of objects greater than 10 lbs. should be avoided for 6 weeks.
- 2. All incisions will be extremely sensitive to sunlight for one year. Direct sun contact is to be avoided and use a sunscreen with SPF 30 or greater for the first 6 months and at least SPF 15 for the next 6 months. Excellent sunscreen options are offered through our various skin care lines.
- 3. Please take all medication carefully and as directed.
- 4. If you have nausea, vomiting, rash, shortness of breath, or diarrhea after taking your medications, please call the office.
- 5. If you develop a fever (oral temperature greater than 101), redness or increased pain at the surgical incisions, please call us immediately.

FOLLOW-UP:

Follow-up after surgery varies based on the extent of the procedure, any pre-existing health conditions you may have, how far away you live, and in the unusual event where there is a complication. For many patients follow-up includes:

- a) Follow-up within 5 to 14 days with our Nurses to pull drains, check wounds, and to address any minor questions or concerns. Our staff will remove the specialized suspension dressing at this time if it is used.
- b) Physician follow-up at 3 weeks, and per physician discretion thereafter.