



1020 N MASON RD STE #110 SAINT LOUIS MO 63141

Office of Dr. Terence Myckatyn & Dr. Marissa Tenenbaum

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, opt. 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

MEDIAL THIGH LIFT

SIX WEEKS BEFORE SURGERY

- 1. Smoking affects healing. Please stop smoking or ANY nicotine products for as long as possible before and after surgery. Our office may perform a urine nicotine test at any time before your surgery to confirm that you have quit smoking.
- 2. 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.

TWO EVENINGS BEFORE SURGERY

1. Take Colace and Arnica

EVENING BEFORE SURGERY

- 1. Drink 24 oz of a clear carbohydrate beverage (Gatorade/power aid) or water
- 2. Eat a late dinner of your choosing
- 3. Have some jello and/or soup available for after surgery.
- 4. Get a good night's rest.
- 5. Take Colace, Arnica, Zofran, Gabapentin, and Celebrex.

DAY OF SURGERY

Be at the Hospital at:	
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- 1. Drink 12 oz of water 4 hours before your scheduled surgery- *Do not drink milk, juice with pulp, cream, or sugar the morning of surgery*
- 2. Do not wear contact lenses, wigs, hairpins, hairpieces or jewelry. Dress in old, loose, comfortable clothes. Do not wear pullover tops or pantyhose. Remove all body piercing jewelry from all locations. Wear slip-on shoes.
- 3. When in the hospital, you will be given the following oral medicines (we will give these to you at the hospital there is no need to obtain or take these beforehand). These may include: Tylenol, Gabapentin and Celecoxib,.
- 4. DO NOT SMOKE

AFTER SURGERY

- 1. **Blood Clot Prevention.** To reduce the risk of blood clots after surgery you may be treated with a drug called *Lovanox*. This drug, also known as *low molecular weight heparin* is injected under the skin of the abdomen daily for at least 5 days after surgery. Before the operation is performed, and while you are in the hospital, you will also have specialized stockings on your lower legs that intermittently massage your ankles. These also reduce the risks of blood clots.
- 2. **Leg wraps.** At first, your legs will be wrapped in ACE bandages from the feet to the groins to reduce swelling, bruising, and fluid accumulation. Ideally, you should wear these full leg wraps all of the time, except showering, for 1 to 2 weeks. Shorter wraps, from the knees to the groins can then be worn for 12 hours a day (while sleeping and at home) for another 4 weeks. The ACE wrap should be tighter at the feet or knees and then slightly looser as the wrap progresses to the groin.
- 3. **Diet.** A light diet is best for the rest of the day after surgery. Begin by taking liquids slowly and progress to soups or jello. You may start a regular diet the next day. Please be sure to consume a diet rich in protein after surgery. This will encourage wound healing.
- 4. **Pain Control after Surgery.** If you have pain or discomfort, take the 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.
- 5. **Drains** will be used to draw off any accumulating fluid after surgery. The bulb should be kept collapsed at all times. The fluid will need to be removed when the drain is no longer collapsed. Please keep a record of how much fluid is emptied from the bulb **in milliliters** over a 24 hour (day) period. Bring this daily record with you to the office appointment. Drains usually stay for 1 to 2 weeks after surgery. The drains will be removed when they have drained less than 30 milliliters within a 24 hour period.
- 6. **Incisions.** The wounds may be sealed with Dermabond or superglue so no wound care except gentle cleaning in the shower is required. Do not use ointment over Dermabond glue.
- 7. **Showering.** You may shower 48 hours after surgery. The incisions can get soapy and wet, but avoid applying full showerhead pressure to them. Avoid submerging under water in a tub or pool.
- 8. **Dressings and Tape.** If supportive steri-strips or tape are used for your surgery, please continue to wear this until your first follow-up visit. Your doctor will remove this when appropriate. If it comes off in the meantime, please contact our office but do not replace it yourself.

OTHER POST-OPERATIVE INSTRUCTIONS

- 1. You may gradually resume normal daily activities after 48 hours, being careful to avoid any activity that causes pain or discomfort. Strenuous activities and exercises are to be avoided until 6 to 8 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 8 weeks depending on your comfort level and the extent of your surgery, and status of any post-surgical wounds. If an activity hurts, back off. Start slow and progress as tolerated. Call your doctor if you have any questions.
- 2. Driving may be resumed when you are off regular narcotic pain medicine.
- 3. Bruising and swelling are normal. This will disappear with time.
- 4. Unusual sensations like swelling, numbness, itching, and burning in the thighs and groin are common during the healing process. These sensations may last several months and will gradually disappear.
- 5. Wound healing problems and scar widening are more common with medial thigh lifts than any other types of cosmetic plastic surgery. This is because hygiene is more difficult to maintain in the groin, there is movement of the groin with walking, and the weight of the thigh skin pulling on your incision. Sutures may spit, and look somewhat like a pimple. The edges of the wound may separate and may require treatment with local wound care, as instructed by your surgeon. Your surgeon may recommend additional scar care like silicone gels or sheets during follow-up visits.
- 6. If you have any questions, sudden onset of extreme pain, fever, drainage or redness, please call Dr. Myckatyn or Dr. Tenenbaum's office at (314) 996-8800.

RETURNING TO WORK:

1. Working from home: 3 to 4 weeks

2. Desk job: 4 weeks

Up on your feet a lot: 4 to 6 weeksManual labor: 6 to 8 weeks 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 of discharge home with our Nurses to pull drains, check wounds, and to address any minor questions or concerns
- b) Physician follow-up at 3 weeks, and per physician discretion thereafter.