

## **POST-OP INSTRUCTIONS FOR TUMMY TUCK/ABDOMINOPLASTY**

1. You will leave the OR with surgical drains in place. These drains are necessary to evacuate the bloody fluid that is expected to form beneath the skin after this type of surgery. These drains will stay in place until Dr. Hendrick determines that the drainage output has diminished enough for removal—typically one to two weeks. Until then you will need to care for the drain. Drain care consists of ensuring the drain bulb holds suction, emptying the drain bulb whenever it is full, occasionally “stripping” the drain line to remove small clots in it, and keeping the drain wound clean and covered. We will show you how to do these simple tasks.
2. **You MUST have someone available to drive you home after surgery! It is also MANDATORY that you have someone stay with you the day and first night of surgery!** We will NOT perform surgery if these arrangements have not been made.
3. Because abdominoplasty is a major operation done on an outpatient basis, it is very important that you have another responsible person available to care for you and assist you for the first several days after your surgery.
4. It is normal for patients to become light-headed when rising from a sitting or lying position. You may also become very light-headed when you remove your garments. Please have someone help you the first time.
5. Dressings and Wound Care: The day following surgery you may remove your abdominal binder once a day to launder it (if needed), shower, and change your bandages. The dressings and abdominal binder must be worn 24 hours a day (with the exception above) for the first three weeks and 12 hours a day (i.e. while home at night) the fourth week. Keep gauze dressings over the incisions and the drain sites until the sutures or drain are removed. Change these dressings at least daily. Do NOT apply Vitamin E ointment to your incision. Other than the above, you may take care of your incision in accordance with our “Standard Wound Care Instruction Sheet.”
6. Post-op medication will be prescribed or dispensed to you the day of your surgery. These will consist of an antibiotic and a painkiller. If you are unable to take any of these medications for any reason, please contact our office so we can arrange for other medications.
7. If you experience nausea or vomiting it is probably due to the medication. Please try to take it with food. If it persists, please contact our office.

8. Diet/meals are not restricted. Drink plenty of clear fluids. We recommend 8 glasses of water or fruit juice a day. Do not drink any alcohol for 48 hours and limit alcohol intake for the first week.
9. Pain pills can cause constipation, and we don't want you straining your abdomen. Therefore, if you feel you may be getting constipated, take a gentle laxative, such as Milk of Magnesia, or call us for a stool softener or laxative prescription.
10. Menstrual irregularity (premature or delayed onset of monthly menstruation) is a common side effect of any significant surgery.
11. Slight temperature elevation during the first 48 hours after surgery is a natural consequence of the body's reaction to surgical trauma. There is Tylenol in your pain medication that should control mild fevers. Call us if your temperature goes higher than 101.5 degrees.
12. Bruising is variable from person to person. Any bruising that you experience should clear in one to three weeks.
13. **ACTIVITY:** Rest for the first 24 hours (but move your legs around frequently). Take it easy and avoid any strenuous activity for the first six weeks. You may resume "normal" activities, such as walking, shopping and light chores as tolerated. Don't drive until you are off your pain medication and have good lower body coordination—about a week for most people. Take a shower daily, but do not use a hot tub or Jacuzzi for two weeks. After four weeks you can do low impact aerobic activities (bicycle, stair-stepper, etc). No weight lifting, skiing, or high impact aerobics for two to three months. If you must lift any weight (such as a child or a box), draw the weight in close to the chest and lift with your legs, not your back or stomach.
14. Post-operative discomfort usually takes the form of deep muscle soreness and incisional pain. This pain largely resolves during the first week.
15. It is normal to have a lot of pulling or pinching sensations for weeks and sometimes months following surgery. The surgical area may turn very hard and feel numb. This is scar tissue and a part of the healing process. Please be patient.
16. You may experience a mild depression the first week after surgery. After this time your mood will improve after you see the swelling and bruising fade. Avoid sunning until the bruising has faded.
17. **DO NOT APPLY HEAT OR ICE TO THE SURGICAL AREAS** unless we instruct you to do so.

18. We do not believe that this procedure is safe for active smokers, therefore, **absolutely NO SMOKING** for at least six weeks after surgery.
19. Post operative appointments are very important to keep since this is how we monitor your healing and make decisions about when to remove drains, if a seroma exists, how the scars are doing, and the like. Detecting early signs of problems is the key to an uneventful recovery, and we cannot do this unless we see you regularly. Please keep all of your post op appointments as scheduled.
20. If you have any questions or concerns, don't hesitate to call us at 309-0900 (local) or 1-866-760-0900 (toll free). After hours and on weekends you will need to call through my answering service at 785-827-4433. Ask to have me paged personally (regardless of who is "on call").