



SMITA R. RAMANADHAM, M.D.
PLASTIC SURGERY

Face/Neck Lift

Patient Care Instructions

General Information

Facial rejuvenation can entail reversing the effects of aging in one area of the face or the entire neck, face, eyelids and brow. Your decision for facial cosmetic surgery is an individual one and the plan will be discussed during your consultations with Dr. Ramanadham. Each area of the face may require different amounts of care depending on what is performed. The neck and face component of facial rejuvenation involves tightening the neck line which involves repair of the superficial neck muscles under the chin (anterior platysmaplasty) as well as removal of fat and skin to define the jaw line. This is combined with a SMAS (Superficial Musculoaponeurotic System) facelift, which repositions the facial soft tissue on this strong structure to provide a natural and long lasting facelift. Dr. Ramanadham advises at least one night of observation to ensure her patients are comfortable and confident in their recovery after this type of surgery.

Things to handle prior to your surgery

Avoid all NSAIDs (motrin, aspirin, ibuprofen, etc) for 7-10 days prior to procedure unless otherwise directed by your doctor. Continued use may cause bleeding.

Avoid all herbal medicine or supplements for 3 weeks prior to procedure. Continued use may cause bleeding.

Arrange for someone to drive you home from the hospital and stay with you for 2 to 3 days.

Necessary medications will be called into your pharmacy or given to you on the day of surgery or discharge. These should be picked up prior to surgery if necessary.

Protein supplementation can be started one to two weeks before surgery and should include over 20 grams of additional protein daily.

Have electrolyte containing fluids such as Gatorade or electrolyte water on hand.

Have stool softeners/laxatives on hand, such as Colace, Biscodyl, Milk of Magnesia. These can be purchased at your local pharmacy.

Review the attached list of medications not to take during the perioperative period. If you have any further questions that were not addressed during your consultation then please call Dr. Ramanadham's office.

If you are unsure if you can stop a medication then please call us. We may direct you to the prescribing provider to confirm if this is medically safe.

For your convenience, we have included a [Suggested Shopping List](#) in the addendum to these instructions.



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You will have the opportunity to discuss your skin care regimen with Dr. Ramanadham prior to surgery. Dr. Ramanadham may recommend the addition of topical creams and skin care prior to surgery in order to improve your overall cosmetic result.

Pre-Operative Guidelines

Smoking should be stopped a minimum of 6 weeks prior to surgery. Smoking should be avoided for at least 6 weeks after surgery as well. Smoking can greatly interfere with healing and lead to severe postoperative complications.

Do not eat or drink anything after midnight the night before surgery. This includes no water, gum, or hard candy.

Blood pressure and/or heart medications can be taken with a sip of water as directed by your prescribing physician.

If you take medication for diabetes then confirm with your prescribing physician how to manage these medications prior to surgery.

If you are prone to nausea or motion sickness let your anesthesiologist know on the day of surgery. Medications can be started prior to surgery or during surgery to help improve your postoperative experience.

Post-Operative Care

Take pain medication as prescribed. Often these medications are necessary for the first two days and then on an as needed basis. Do not drink alcohol with these medications.

You will have a blood pressure medication patch on your skin. This will be removed in our office during the first visit. If you feel dizzy or lightheaded, please call our office.

You may have an anti-nausea patch placed by the anesthesiologist. Please remove this as instructed by the anesthesiologist. Do not touch your eyes after you remove the patch. Immediately wash your hands after removal.

Take a suggested stool softener/laxative until bowels begin to function normally after surgery. A combination of anesthesia, muscle relaxants and pain medications usually make these necessary for a few days.

Do not smoke or be around smoking as even second hand smoke delays healing and increases the risk of complications.

Get plenty of rest.

Follow a well-balanced diet, which includes protein and is limited in salt intake. A high salt diet or meal, can lead to increased swelling and prolonged recovery. It is best to continue the protein supplementation for approximately 3 weeks after surgery.



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Oral hydration should include the use of electrolyte containing fluids such as Gatorade or a low calorie substitute. Limit the amount of caffeinated beverages as they can promote dehydration; however, Dr. Ramanadham recommends you maintain your daily average of caffeine to avoid headaches.

Apply ice packs and/or bags of ice (small crushed ice or frozen peas in a zip lock bag is best) to your cheeks and eyes as much as possible during the day for the first 3 to 5 days to reduce the amount of swelling you have after surgery. Swelling will peak in 48 to 72 hours. Swiss Eye Masks may be provided by Dr. Ramanadham.

Keep your head elevated at least 45 degrees above your heart at all times to decrease swelling for 2 weeks.

Activity Restrictions

Avoid turning your head to either side as this will pull on the stitch lines. To turn, move your head and shoulders as a unit.

Avoid massaging and rubbing your face and eyes for at least 14 days after surgery to avoid disruption of internal sutures.

Do not lift anything heavier than 10 pounds for 6 weeks.

Do not drive for 7 – 10 days or until your vision is normal and your neck is comfortable and you are no longer taking pain medication.

Smiling, yawning, massaging or pulling on the eyelids should be avoided for 2 weeks after surgery. This is especially important the first few days following removal of the stitches.

Do not run, lift weights, play tennis or golf for 6 weeks after surgery. It is important to keep your heart rate under 100 beats per minute for 4 weeks.

Light cardiovascular exercises can be resumed gradually after 4 weeks.

Heavy lifting/stretching (Yoga) can be resumed after 6 weeks.

Incisions and Face Care

On the first day after surgery, Dr. Ramanadham will remove all operative dressings, which include gauze, non-adherent gauze, ointment, cotton padding and elastic wraps.

There will be 2 small drain tubes that will be removed at this time as well. They are placed under the neck skin and exit behind the ear and help collect fluid under the skin.

Dr. Ramanadham may replace this dressing with a lighter one. This should remain in place until your first visit.

When the facial dressings are removed, you can begin washing your face (but not your eyelids) gently with mild soap and rinse with water. It will not hurt to get water on the stitches or in the eyes. Make sure someone is with you at your first shower.



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If you have eyelid surgery then use ophthalmic bacitracin only around the eyes. Do not place inside the eyes. You will be given eye drops/ointment for use inside the eye. **Do not pull on the eyelids during placement.**

You may wash your hair with baby shampoo the day after surgery. It may take several washings before all the crust is out of your hair. Do not use hair sprays, conditioners, gels, etc. while the stitches and clips are in place. Your hair may be dried with a blow dryer on a cool, **not a hot** setting.

Cosmetics can be worn on the face as early as 14 days after surgery, however, do not place over the incisions. Avoid heavy foundation. A loose powder is okay. However, eyelid or eyelash cosmetics should NOT be worn until after the eyelid sutures have been removed and incisions are completely healed (if eyelid surgery was performed)

Hair coloring should be delayed until 6 weeks or more after surgery when healing is complete.

The incision and any areas of bruising can be lightly dressed with a fragrance free moisturizing cream starting one week after surgery. This will promote early softening and maturation of these areas.

Skin care should be kept to a minimum for the first week after surgery. This will be directed by our office.

What to Expect after Facelift Surgery

The most common complaint after surgery is a mild headache.

For the first 2 weeks avoid NSAIDS (Motrin, Ibuprofen, Advil, Aleve). The pain medication prescribed typically has Tylenol included in it so this will likely help. Tylenol alone can also be taken but do not exceed the recommend daily amount as instructed on the bottle.

Your face and neck will feel tight and swelling will be worse over the first 2 days. There will be a feeling of numbness in these areas that will last for several weeks to months after surgery. This is normal and will disappear over time and the feeling will return. Keeping your head elevated above your heart, as previously recommended, will help minimize this discomfort. **Do not lay flat.**

Your face and neck will also experience moderate swelling and bruising, which will subside in 6 weeks.

It is common to have discomfort and mild burning at the incisions after facelift surgery; this is normal and will improve shortly after surgery.

Discomfort in the areas of surgery may worsen with increased activity and relates to swelling of and the internal sutures.

You can expect some slight bloody oozing from the suture lines and swelling of the incisions. Gauze may be reapplied if it is bothersome. You should call the clinic if you have continuous bleeding, significantly more swelling on one side of the face than the other, or any severe pain associated with swelling.

Swelling may cause the lower lid to pull away from the eye and look like fluid is in the white part of your eye. This is not uncommon and will subside as the swelling goes down. If this occurs and the eyes feel irritated then call our office for recommendations.



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Red discoloration of the incisions may occur if there is significant swelling, especially in the area of the sutures. This will resolve when the stitches are removed and the incisions heal.

Most people are able to return to social activities at approximately 2-3 weeks.

When to Call the Office

If you have increased swelling and bruising on one side of the face significantly more than the other. Remove any covering/dressing to make this determination. This may represent a hematoma (collection of blood) or a seroma (collection of clear fluid).

If you have persistent eye irritation after most of the swelling subsides.

If you have increasing redness or swelling around the incision.

If you have severe pain not relieved by pain medication.

If you have any side effects from the medication: rash, nausea, headache, vomiting.

If you have fever over 101.

If you have yellow or greenish drainage from an incision or notice a foul odor.

If you notice some vaginal burning and itching or severe diarrhea as a result of the antibiotics used during and after surgery.

For medical questions, please call our office.

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Follow-up Care and Appointments

Your permanent sutures will be removed gradually over a 5 to 14 day period. Sutures are typically removed as follows:

In front of the ears: 5 to 8 days

Chin: 5 to 8 days

Staples in your hair: 10 to 14 days

Eyelid: 4 to 6 days (if a Blepharoplasty was performed)

Some sutures will be dissolvable. If these sutures persist after 3-4 weeks, they will be removed.

You should schedule to see Dr. Ramanadham in 5 days after surgery and at 10-14 days for suture removal.

Additional follow-up with Dr. Ramanadham should be scheduled at 4 weeks, 10 weeks, 6 months and 1 year. This may vary.



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Suggested Shopping List

Items to have on hand prior to surgery

Face / Neck Lift

- Prescriptions will be called into your local pharmacy as ordered by Dr. Ramanadham or given to you at discharge. Typical medications are as follows but these will be tailored to your needs.
 - Norco or tramadol (pain medication)
 - Valium or Xanax (muscle relaxant and anti-anxiety medication)
 - Medrol Dose Pack (steroids)
 - Zofran (nausea)
 - Eye drops or ointments if necessary

- Bacitracin Ointment

- Gatorade or another low calorie alternative, such as water with electrolytes

- Protein Supplements

- Stool softener / laxative (choose one):
 - Docusate (Colace) 100 mg orally two to three times daily when taking pain medication
 - Milk of Magnesia 30cc/1 Tablespoon twice daily when taking pain medication
 - Prune juice or Sorbitol orally
 - Biscodyl or Magnesium Citrate as needed for constipation

- Baby Shampoo

- Ice Packs or Ziploc bags with frozen peas or purchase Swiss Eye Masks (available at our clinic)