



SMITA R. RAMANADHAM, M.D.  
PLASTIC SURGERY

## Genioplasty or chin implant

### Patient Care Instructions

#### *General Information*

A chin implant can be placed to increase the projection and size of your chin to improve your facial proportions. It is commonly done through an incision directly under your chin. This scar is hidden in a skin crease that already exists.

#### *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.

#### *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.



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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.

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.

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 chin as needed for comfort.

Keep your head elevated at least 45 degrees above your heart at all times to decrease swelling for 1 weeks.

### *Activity Restrictions*

Avoid pressure to your chin or leaning on your chin.

Avoid massaging and rubbing your chin 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.



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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 Chin Care*

You will have skin glue over the incision. This will fall off on its own.

You will have an overlying gauze dressing, tape, or wrap. This should remain in place for 2 days.

It is okay to shower the day after surgery but keep dressing dry. Once you remove the dressing in 2 days you can shower and get incision wet. It is okay to gently wash with soap and water. Pat dry.

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*

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.

Keeping your head elevated above your heart, as previously recommended, will help minimize this discomfort. **Do not lay flat.**

Your chin 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; 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.

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.



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### *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 7 day period.

You should schedule to see Dr. Ramanadham in 5-7 days after surgery. Additional follow-up with Dr. Ramanadham should be scheduled at 2-4 weeks, 10 weeks, 6 months and 1 year. This may vary.

### *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.
  - Peridex mouth wash
  - Norco or tramadol (pain medication)
  - Valium or Xanax (muscle relaxant and anti-anxiety medication)
  - Medrol Dose Pack (steroids)



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