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General Information and Post-Operative Care For:
THIGH LIFT

The general information and post-operative instructions were carefully written with you in mind. Take the time to read them thoroughly several times. We have found that faithful adherence to the guidelines will give you the smoothest recovery and optimum results. If a question does arise, first refer back to these pages. If you are still uncertain, please call our office at **(501) 227-8811**.

I. ITEMS NEEDED:

Prescription medicines
Q-tips
Hydrogen peroxide
Polysporin ointment

2. THE PROCEDURE:

Reasons and Goals: The goal of a thigh lift is to remove excess skin and fat from the lower extremities. This procedure is indicated when the elasticity of the skin has surpassed the ability to contract on its own. The extent of the surgery depends on the amount of excess skin and fat present. The laxity of the skin is also a factor in the final result of this surgical procedure.

Anesthesia: Surgery is carried out under general anesthesia.

Scars: Although hidden by clothing, a sizable scar may result from the thigh lift. This scar may widen and require surgical improvement at a later time. Every effort is made to reduce the size of the scar and to make it as inconspicuous as possible. In spite of the scarring, most patients are enthusiastic about their results.

3. POST-OPERATIVE CARE:

Bleeding: Please contact our office immediately if sudden, profuse bleeding occurs. Remain calm as excitement and panic raises your blood pressure and worsens bleeding.

Bruising: Bruising may occur in the surgical area following the procedure. If bruising develops, it should be gone in 3 to 6 weeks.

Discomfort: You may experience moderate discomfort after the procedure. During this time, you may find it more comfortable to place a pillow under your legs while in bed.

Drains: Drains will be placed during surgery. These drains relieve the fluid that accumulates after surgery and aids healing. Your drains will be removed during your first post-operative week, when the fluid begins to turn a clear straw color

and/or the amount of drainage decreases. *Please contact us if the bulb rapidly refills or if you need to empty it more than three times a day.*

Drain Care: Secure the bulb of the drain to your clothing or support garment with a safety pin. When 50% or more of the bulb is full, empty the bulb by opening the plug located on top. Squeeze the bulb to compress it, and put the plug back into the hole at the top to maintain the vacuum. Maintain a record of the daily (24 hour) drain output for each drain separately and bring it to your post-operative appointment. Please record output in ml(cc's), not in oz. Please refer to the instruction: How to Care for Your Jackson-Pratt Drains.

Incisions: Some oozing along your incision may occur the first 24 to 96 hours after surgery. Keep incisions **that are not taped** clean and moist. Clean incisions, gently softening any crusting, with a Q-tip soaked in hydrogen peroxide 2 to 4 times daily. Follow this cleaning with an application of Polysporin ointment. Placing non-stick gauze pads over the incisions may help keep the ointment off clothing. Do not use Polysporin for more than a week.

Showering: You may shower after your drains are removed.

Garment: A support garment will be placed at the time of surgery. It will fit snugly. This is to be worn at all times unless instructed otherwise.

Sutures: Sutures and staples will be removed at 6-10 days post-op. Tape may be used to cover the incision and act as a scar guard. Do NOT remove tape that has been applied. If the edges of the tape loosen, you may trim them carefully with blunt-nosed scissors.

Swelling: Swelling around your incision should be minimal and will peak at 72 hours. As a general rule, 80% of your swelling is gone in 2 to 6 weeks and the remainder should be gone in 3 to 6 months. To minimize swelling, keep your legs elevated on pillows while sitting or sleeping for 2 weeks after surgery. Sleep on your back and not on your side. Avoidance of salt in your diet will also help to prevent excess swelling. *Please contact our office immediately if severe purple swelling occurs.*

Driving: Do not drive if you are taking pain medication. It is not recommended to drive for 1 to 2 weeks following surgery.

Extra Cautions: Avoid children and pets that can jump or climb on you. Children and pets may accidentally hit your surgical site or cause you to stretch inappropriately resulting in pain and/or complications.

Fever: You may run a slight temperature the first few days following surgery. If so, increase your fluid intake and take Tylenol. Do not exceed 8 Tylenol per day. *Please notify us of any fever above 100.5 degrees that Tylenol does not control.*

Numbness/Firmness and Tenderness: Areas of numbness, firmness and tenderness around your incision and under your skin are common. Normal feeling should return several months up to 2 years after surgery.

Physical Activities: You may resume moderate walks after the first 2 to 4 weeks as tolerated. *Avoid* lifting, bending, straining, or aerobic exercise for at least 6 weeks following surgery. *Avoid* contact sports for 3 to 4 months.

Sun: Avoid the sun which may darken maturing scars. Protect incisions by using sunscreen with an SPF of 30 and by covering them with clothing.

4. CARE AT A GLANCE:

Wear support garments until instructed otherwise.

Remove the liquid from your drain reservoirs and record output.

If tape covers your incision, leave it in place.

If no tape covers your incision, clean it with or hydrogen peroxide and apply Polysporin ointment.

DO NOT:

Take a bath, swim, or immerse body until instructed it is safe to do so.

Perform movements that put stress on the incision until instructed otherwise.

Expose incision to the sun.