

Post-Operative Instructions Following Blepharoplasty (Eyelid) Surgery

Clinic Phone Number: 801-449-9990

1. Post-operative care:

A caregiver over the age of 18 must be with you for 24 hours following surgery.

- **Immediately after your surgery-** Go to www.MobleyMD.com/care. There is a post-op care video(s) for you to watch. Begin this care when you are told to do so by Dr. Mobley- most often the first night.

2. How you should expect to feel after surgery:

- General Anesthesia can make you feel groggy for up to 48 hours after surgery. This can cause nausea and sometimes vomiting. Keep yourself hydrated with water, 7-up, Gatorade, or other sport drinks. Eat a bland diet (saltine crackers and broth for starters).
- After surgery you will have some pain and discomfort due to the surgery, which is to be expected and should be controlled with pain medications (Tylenol or prescription pain medications only)
- **Escalating, severe pain is not typical and should be addressed.**
- You will awaken with gauze covering each eye; crushed ice will be placed on top of the gauze to create an iced compress. Do not take off the compresses; just replace the ice every 30 minutes. This will help control the swelling. Swelling usually peaks at day 3, and usually subsides after that. It is not uncommon for some minor swelling to last 2-5 weeks after surgery. Each patient is different in their healing process.
- When resting, elevate your head above your heart to help decrease swelling for the first 3 days after surgery. An extra

pillow or two is usually all that is needed. Sleeping sitting up is not necessary.

- Upper and lower blepharoplasty temporarily effects vision. Wearing glasses is recommended. Avoid wearing contact lenses for at least 2 weeks.

3. Wound care:

- **Cool (NOT ICE-cold) compresses to your eyes after blepharoplasty is always recommended.** Use about 20 minutes on and 20 minutes off. Use your common sense and do not over-freeze the area. But keeping it cool is important.
- Upper blepharoplasty: Apply a thin smear of the eye ointment on all of the stitches 3-4 times a day.
- Lower blepharoplasty: Using over the counter Artificial Tears can be used to soothe the eyes. A thicker gel such as Genteal Eye Gel can be used at night.
- In certain cases, Dr. Mobley may prescribe you a topical steroid eye drop. Follow the directions from Dr. Mobley closely.

Pain Management:

- Dr. Mobley will prescribe a narcotic pain medication to help control your pain after surgery. Our staff will explain in detail how and when to use them. **If you have any allergies or issues (nausea, itching, or sensitivities) with a certain pain medication, please let them know in advance, so they are able to give you the right pain medication.**
- **Tylenol is the ONLY over-the-counter pain medication you are able to take after surgery for seven days. No aspirin, Alleve, or Ibuprofen. They can all cause bleeding.**
- Common side effects of narcotics include:
 - Constipation: Take stool softeners (Mira Lax), increase fluids, walk more.
 - Nausea: Decrease narcotics, use a suppository, and take medication with food.
 - Loss of appetite: This will improve over time and once you stop taking the narcotic.
 - Sleepiness: This will improve once you stop taking the narcotics.
 - You should **NEVER** drive or consume alcohol while taking narcotic pain medication.

4. **Activity/Exercise:**

- Following your surgery, NO strenuous activity or exercise should be performed for the first week.
- **Light mobility is encouraged and is vital to your recovery. Take short, frequent walks around your house to decrease the chances of any complications, to avoid developing a leg blood clot, and maintain good circulation.**
- **Do not lie in bed for extended periods of time.**
- One week following surgery you can begin to increase your activity by 15% each day. By the 14th day following surgery you should be back to your normal activities.

5. **Return to work:**

- In most cases you will be able to return to work within 7-10 days from your surgery. Each patient is different in their healing process so this can be discussed at one of your post-op appointments. A return to work form can be given to you at that time.

Signature: _____ Date: _____

ON-CALL POLICY

- Dr. Mobley is in solo private practice. This arrangement ensures many benefits for patients, such as a very customized office surgical experience. Every effort is made to be available to patients as much as is humanly and reasonably possible but no one doctor could himself be available to every patient 24 hours a day, 365 days per year. Dr. Mobley maintains several on-call relationships with doctors in the valley including Scott Haupt, MD, John Bitner, MD, Scott Thompson, MD, Lucy Barr, MD and Dr. Benjamin Dunkley. Dr. Mobley is also a member of St. Marks Hospital. Dr. Mobley is also a clinical adjunct Assoc. Professor of Surgery at the University of Utah Hospital and has a close relationship with Dr. Eric Cerrati.
- If you were to experience a serious concern after business hours or on the weekend, you should first try contacting Dr. Mobley. In most cases, he will be able to assist you via his cell phone but if he is out of town and you need to be seen in person, it is very likely that one of the doctors mentioned above would be available to assist in your care. The after hours "emergency" number is 801-989-7407. After that, your options would include going to the emergency rooms of St. Mark's Hospital, or the University of Utah Hospital, all of which should have an otolaryngologist and/or a plastic/facial plastic surgeon on call who can provide proper emergency / urgent medical care. If your home is more than a few hours from Salt Lake City, you may wish to contact a local ENT surgeon or facial/plastic surgeon rather than traveling to Salt Lake City.
- **IN THE CASE OF A LIFE-THREATENING EMERGENCY, YOU SHOULD**

PROCEED DIRECTLY TO THE NEAREST EMERGENCY ROOM RATHER THAN TRYING TO CONTACT DR. MOBLEY OR ANY OF HIS ASSOCIATES AND THEREBY DELAYING TREATMENT.

With over a decade of experience, Dr. Mobley has found that true on-call emergencies are fortunately few and far between. The purpose of this policy is to inform you that every effort will be made to connect you with Dr. Mobley in the rare event of a true on-call emergency. If Dr. Mobley is unavailable, you should have confidence knowing that there are several different options for you to pursue, including seeking care in an emergency room. The chances of any one patient needing this care are quite small but in healthcare there is no such thing as zero risk, so we provide this information to you with full transparency.
