



MOBLEY MD

Facial Plastic Surgery
Skin Care & Aesthetics



Look GREAT
Feel GREAT

MoblelyMD.com



Post-Operative Instructions Following Fat Grafting Surgery

Clinic Phone Number: (801)449-9990

1. **Post-operative care:**

2. **Immediately after your surgery-** Go to www.MoblelyMD.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.

3. **How you should expect to feel after surgery:**

- Procedures 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 sports 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 have swelling, which is common after facial surgery. You are able to use ice for 20 minutes on, 20 minutes off. 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. A pillow or two is usually all that is needed. Sleeping sitting up is not necessary.
- **Wound Care:**
 - Cut a standard bathroom washcloth into quarters. Have a bowl of crushed ice and water next to you where you are resting. Allow the washcloth pieces to soak in the ice water. Remove two pieces and wring them out so they are no longer dripping but still ice-cold to the touch and place on the areas injected with fat.

- When the compresses no longer feel cold, exchange them for the remaining two in the ice bath.
- Keep alternating the compresses for the first 48 hours after surgery.
- Use common sense, and, if the skin is getting too cold, remove the compresses for approximately 20 minutes before resuming cooling.
- If the ice bath water gets tinged, replace with fresh water and ice.
 - Expect some oozing from the donor site (often the buttock or flank area). It is best to wear tight “yoga” pants for the first 1-2 days and keep a dry washcloth around the donor area to soak up any leakage.
 - Be aware your bed sheets can get stained so plan around this.

4. Pain Management:

- Dr. Mobley will prescribe you a narcotic Pain Medication to help control your pain after surgery. They 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 a more compatible pain medication prescription.**
- **Tylenol is the ONLY over the counter pain medication you are able to take after surgery for seven days.**
- Common side effects of narcotics include:
 - Constipation: Take stool softeners (MiraLax,) increase fluids and 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.

5. Activity/Exercise:

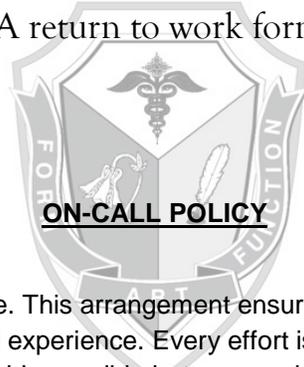
- Following your surgery, NO strenuous activity or exercise should be performed for the first week.
- **Light mobility is encouraged and is vital to your recovery. Take short, frequent walks around your house to decrease the chances**

of any complications, 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.

6. **Return to work:**

- In most cases you will be able to return to work within a week 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.



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 Rick Aoki, MD. Dr. Mobley is also a member of St. Marks Hospital where fellow Facial Plastic Surgeon Dr. Randal Swenson is affiliated. Dr. Mobley is also a clinical adjunct Asst. Professor of Surgery at the University of Utah Hospital and has a close relationship with P. Daniel Ward, MD.

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.



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