



Lower Transconjunctival 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.

 Before and 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.

 Go to www.MobleyMD.com/care. There is a post-op care video(s) for you to watch explaining the optimal use of your prescriptions. It explains when you should be taking your pain medication.
- 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 slowly subsides after that. It is common 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 can sometimes temporarily effect vision and can cause blurred vision. If the blurred vision is concerning, call the office. Wearing glasses is recommended. Avoid wearing contact lenses for at least 2 weeks.

3. Wound care:

- Using over the counter Artificial Tears can be used to soothe the eyes. A thicker gel such as Genteal Eye Gel, Systane, or Theratears may be used at night. Preservative free and individual single use is preferred.
- <u>Cool, NOT ice cold</u> compresses to your eyes after blepharoplasty is 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.
- Lower Transconjunctival "pinch": In some cases a "pinch" of skin is removed from the lower eyelid just below the lashes. There is surgical tape placed strategically on the outer corner of the eyes. Do NOT touch or remove these. They will be removed when the stitches are removed. Apply a thin smear of the eye ointment on all of the stitches 3-4 times a day. Go to www.MobleyMD.com/care. There is a post-op care video(s) for you to watch, "Subciliary bleph" pay close attention to cleaning of the suture.

4. Steroid Eyedrops:

- Dr. Mobley will prescribe you a topical steroid eye drop. Follow these directions below closely.
- Ophthalmic steroids are eye drops, gels or ointments that have specifically made to be administered into or around the eye. Ophthalmic steroids treat inflammation and relieve symptoms such as pain, swelling, redness or irritation. This medication should be used only as directed. Do not use more of it, do not

- use it more often, or for a longer amount of time than ordered. If used incorrectly, there is a chance of unwanted side effects such as thinning of tissues to the eye.
- The bottom line is for the first one to seven days following your operation use the steroid drops as needed for pain relief but at the same time try to use them as little as possible. Each patient's need for steroids will be unique, but generally speaking, it would not be uncommon to use one drop 3 to 4 times per day for the first one to three days. Then decrease it to one drop twice a day for a few days. Then perhaps one drop a day. Wean yourself off the use of this medication inside of the first seven days of your surgery.

5. Pain Management:

- Go to www.MobleyMD.com/care. There is a post-op care video(s) for you to watch that explains the pain medications and how to take them appropriately.
- Dr. Mobley will prescribe a narcotic pain medication to help control your pain after surgery. 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, Ibuprofen, or Tumeric. 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.

6. Activity/Exercise:

• Following your surgery, <u>NO</u> strenuous activity or exercise 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 complications, to decrease the possibility of developing a 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.

7. 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:	Dotos
Signature:	Date: