ARM TUCK

DR. GERUT'S POSTOPERATIVE INSTRUCTIONS

Do not do anything that raises your blood pressure or causes excessive arm motion for the first five days after surgery! NO SEX, LIFTING, REACHING UP, ARM BENDING, ETC. For a few days after surgery keep your arms and shoulders as still as possible. You will experience pain or discomfort with all elbow and shoulder motions. If a specific motion hurts - DON'T DO IT. Slowly, your activity will increase as you heal. You will NOT have FULL motion of your elbows and shoulders for at least a week or more after surgery. Excessive swelling due to too much activity can cause prolonged fluid build-up under your skin, which will need to be drained and will hurt your healing. DO NOT SMOKE! Smoking can cause the skin near your scar to die and can slow your healing tremendously.

You must wiggle your toes and ankles and move your knees as much as possible to help prevent blood clots from forming in your legs. Do this as much as possible until you are walking normally. Also, keep your hands active; squeezing your fists intentionally to minimize hand and finger swelling.

Please take the medications that Dr. Gerut indicates with a check mark. Any medication not checked off may be taken if necessary. **If you are allergic to any of these medications, please let us know!** Please take all pills with a bit of food to avoid nausea. You will be given prescriptions for medications to be taken AFTER your surgery. Please do not confuse them with the preoperative medications. Keep your medications at home for use after surgery. If you are staying overnight in the hospital or in our office we will provide the necessary medications. Do not bring them with you. When you fill your prescriptions, the bottles will be labeled **only with the medical names** and for your reference, these medical names are in parentheses below.

Antibiotic:	□ Keflex (Cephalexin)- 500 mg (1 pill), 2 times a day
	Or if allergic to Penicillin,
	Vibramycin (Doxycycline) - 100mg 2 times a day
Severe Pain:	□ Percocet (Oxycodone) - 1-2 pills every three to four hours as needed. For the first two days, you should take the pain pills every 2 or 3 hours and not wait to feel it.
OR	
<u>Moderate Pain</u> :	□ Norco (hydrocodone bitartrate and acetaminophen) - 1-2 pills every three to four hours as needed.
<u>Nausea</u> :	Compazine (Prochloperazine) Use one if needed. Never use more than 2 in 24 hours. If nausea returns, and you weigh less than 160 pounds, call the office before using a second suppository.
Anti-swelling:	Medrol - take pills as directed on package, begin the morning after surgery.
Constipation :	Ex-Lax (or any other mild laxative as needed)
<u>Multi-Vitamin</u> :	□1 daily; and Vitamin C -take two or more 500 mg tablets daily

KEEP COMPRESSION SLEEVES ON AT ALL TIMES during the first few days at home except when taking a shower. You can shower two days after surgery. It is best to sit on a beach chair in your tub and shower sitting down. **YOU MUST have help** getting in and out of the shower chair to avoid fainting or falling. **DO NOT Take a bath!** Getting in and out of the tub will be very difficult. You can **BRIEFLY** get your incisions wet by letting the shower spray run down onto the stitches. Then quickly pat the incisions dry with a soft towel, reapply gauze if needed and put garment back on.

After the first two days you may take off the sleeves for an hour or two at a time while you wash them.

All stitches are dissolving and will be gone within three weeks or we will remove them. Do not cut or pull any visible stitches.

Cough and breathe deeply, this will help prevent post-operative respiratory infections.

If you need to go home with drains in, we will show you how to empty the bulb twice a day and keep a careful record of how much comes out. Make sure there is always suction on the drains by keeping the bulbs collapsed and the plugs in tightly. (see attached directions)

Expect small areas of bloody or yellowish drainage on your bandages and garment. These areas may develop even weeks after your surgery. Small amounts of drainage are expected. Severe bleeding or large amounts of drainage must be reported to Dr. Gerut immediately.

Your upper arms will be numb for several months after surgery. This will return to normal very slowly. It is possible that a small area of skin at the center of the arm will stay numb.

Expect to be constipated after surgery due to the effects of anesthesia and your medications and lack of motion. This will subside with time. You may use Ex-Lax or mild laxative.

Expect that your shoulders, arms and even your hands will feel stiff and tight after surgery. You must move them around to get rid of the stiffness beginning after 5 days.

Your incision lines will appear red and feel hard for months after surgery. Your final scar appearance will not be evident for over one year. If any part of your scar does not heal well, it is easily repaired but not until at least six months after surgery. Do not expose your scars to direct or prolonged sunlight for one year after surgery.

Do not apply any treatments or creams to the surgical area unless approved by Dr. Gerut. No hot water bottles, heating pads, or topical treatments.

No aspirin, Bufferin, APC, Fiorinal, Alka Seltzer, Ecotrin, Excedrin, Anacin, Vitamin E or any other medication not directed by Dr. Gerut for one week AFTER surgery. Regarding Advil or Motrin, check with Dr. Gerut or his office staff.

Acidophilus, Monistat, or Diflucan (or other over the counter anti-yeast infection medication) to avoid or treat yeast infection from antibiotics.

I have been advised of the possible complications (there are others not listed here):

Bleeding	Thrombophlebitis	Reaction to the sutures
Infection	Hypertrophic Scars	Change in shape of arms
Need for revisional surgery	Keloids	Skin discoloration
Wound Dehiscence	Chronic Pain	Disability
Skin Numbness	Nerve Damage	Scar discoloration
Seroma	Anesthesia Risks	Paresthesias
Skin Necrosis	Hematoma	Contour deformities
Loose skin at elbow(s) and/or	Swelling of arm(s) and/or hand(s)	

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Any severe increase in pain or swelling or any other emergency should be reported to Dr. Gerut immediately at 516-295-2100. After the office is closed please call Dr. Gerut's service at (516) 620-3619.

Please call the office at your earliest convenience to schedule your post-operative appointment.

Significant weight gain or weight loss (change of 7% or more in body weight) can affect your surgical result. For this reason, you must agree to make all efforts to keep your weight stable after your procedure. If your weight changes significantly (change of 7% or more in body weight) after your procedure, you will not be entitled to any free "touch-up" procedures to the same area and you will be charged a surgical fee and an operating room fee and an anesthesia fee. If for other reasons, revisional surgery is required, there may be a surgical fee but even if there is no surgical fee, THERE WILL BE A STANDARD FEE FOR THE OPERATING ROOM AND THE ANESTHESIA.

No Aspirin, Bufferin, APC, Fiorinal, Alka Seltzer, Ecotrin, Excedrin, Anacin, Vitamin E or any other medication not directed by Dr. Gerut for ONE WEEK AFTER SURGERY. Regarding Advil or Motrin, check with Dr. Gerut or his office staff. During the time that you are taking a narcotic pain reliever, you are to avoid driving or operating heavy machinery. Dizziness or severe drowsiness can cause falls or other accidents.

I have read the above instructions (3 pages total) and possible problems fully, all my questions have been answered and I understand and accept the instructions and possible problems fully.

I have read the three pages of instructions, my questions have been answered and I understand the instructions fully.

Patient Sign	ature	

Date

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