

## Rhytidectomy (Facelift)/ Plastysmaplasty (Neck lift) Information Sheet

### PROCEDURE

A facelift procedure and/or neck lift procedure rejuvenates the face by re-suspending the ligament and connective tissue structures in the face beneath the skin, and then also re-draping the skin around the lower two-thirds of the face and neck. These procedures are all considered to be part of a spectrum. There is skin removed from the face and some permanent sutures both below and above the skin are placed. It is often combined with blepharoplasty, liposuction, or laser type procedures to ensure your result is blended. A good skin care regimen is important to have in place before the surgery to elongate its result as well.

### PREOPERATIVE

After you have your surgery date, you will receive more specific information about what appointments you are required to complete before the surgery.

Ensure you have booked an overnight stay in the Parkside hotel to ensure that our nurses can easily check on you the day after surgery before you are discharged to home. You will need to decide who will be your support person there solely for you for 2 hours after the surgery, and that they are comfortable helping you with very basic wound care, which our nurses will teach you both to perform. You cannot drive while taking pain medications, so please arrange for transportation as needed for approximately a week after surgery and for your first postoperative appointment at one week. **It is helpful to train yourself to be able to sleep on your back as this is required for recovery. Wedge pillows can help in this process and after the surgery.**

Please have the following dressing supplies on hand for postop care:

- gauze (sterile or nonsterile, 3x3 inch or 4x4 inch, whichever is easily available)
- cotton-tipped applicators (“Q-tips”)
- peroxide
- cool compresses/gel ice packs
- Tylenol extra strength and Ibuprofen 400mg

Remember that if Dr. Robinson has recommended Botox, laser, or a skin care regimen prior to the surgery, it will be important that you have met with and have a treatment plan in place with the non-surgical department prior to proceeding with surgery. Please touch base with the office if this has not been arranged.

## DAY OF SURGERY

Arrival time will be given to you 1-2 weeks prior to surgery, and could be anytime during the day. You will be required to fast overnight for your safety. This procedure is typically done under monitored sedation anesthetic, which means local freezing in combination with some sedation by our anesthesiologist. Recovery from this anesthetic is shorter than with a general anesthetic, although sometimes this is required when combining with body procedures. Dr. Robinson will see you before the surgery to take photos, have a final discussion, and apply markings for the surgery. When the surgery is complete, you will be taken through your postoperative instructions by the recovery room nurse along with your support person, and be discharged to your nearby disposition along with your support person. A prescription for pain medication is provided, and best if your support person can obtain this while you are having surgery.

## POST-OPERATIVE & LONG TERM FOLLOWUP

You will need to rest at home with your head elevated for at least a week, using ice packs on and off for 10-minute intervals only. You will have a face garment for compression to wear 24-7 for a week after the surgery. You will have to sleep on your back to avoid disturbing the work done on each side of the face for 2 weeks. **Leave the dressings on until postoperative day 2, when you should gently wash the ointments off with the gauze and peroxide provided. Wash your hands thoroughly prior to handling the incisions. The cotton tipped applicators are helpful for gently wiping away any crusted scabs of blood from the incisions as these can collect bacteria. Reapply the ointment with cotton tipped applicators, replace gauze and garment. Do this once daily until your sutures are removed in the office by our nurse 5-7 days postoperatively.**

Please rest at home walking around your house every hour or so for a few minutes for the first few days. Avoid bending or lifting where your head is positioned below your heart, which can cause bleeding and swelling. By one week, you will be able to walk outside your house, but not lift more than 5 lbs. Incisions and bruising have a good chance of being presentable enough to be out and about for short periods of time. Gradual return to activities over 4 weeks until maximum exertion exercise tolerated at 4-6 weeks.

Although rare, postoperative complications can occur. Please call Dr. Robinson's office if you experience any of the following: sudden, noticeable swelling or bruising on one or both sides, fever, chills, temperature above 38 degrees Celsius, sudden increase in pain or tearing sensation. If these are emergency concerns after hours, Dr. Robinson can be reached at her number provided to you on the day of surgery.

Dr. Robinson will see you after the nurse performs the initial postoperative care visit around 6 weeks and 3 months postoperatively, when your final result will be clearer.

If you have had any adjunctive procedures, there will be more instructions regarding care for those areas provided on separate sheets.