

Gluteoplasty/Buttockplasty (buttock lift) Information Sheet

PROCEDURE

Excess skin and fat in the buttock area can be removed with buttockplasty. This procedure is usually associated with redundant skin in the buttock area after significant weight loss. A buttock lift can address the area above the buttocks or below the gluteal folds. As with many other body contour surgeries, patients are exchanging contour for scars. Dr. Robinson would assess each patient's concerns and design the appropriate surgical plan as needed.

PRE-OPERATIVE

Prior to booking surgery, you will need to decide who your support person will be. It is important that they are aware of the type of surgery you are having, that they are not "squeamish" (they will be assisting with hygiene, mobility, and possibly the use of a catheter), and that they are available solely to you during your immediate recovery period (they should not have any other commitments). At the minimum, you cannot be left alone for the first 24 hours after surgery, and you should have someone available to help you 24/7 for about 3-5 days with regular daily activities, such as making meals, walking the dog, etc. You will need assistance getting in and out of bed. For patients with young children, additional support is required. We recommend two supports: one to care for you, and one to care for your children. We advise against driving until after you are seen in office postoperatively, as you cannot drive while taking pain medication, and you may find sitting and moving your lower extremities uncomfortable.

After you have paid a deposit and a surgical date has been confirmed, you will receive more specific information and a review of what you are required to complete before surgery. Once you have booked your date, please ensure you have the following supplies on hand:

- Stool softener (i.e. Colace and Senokot), as pain medications can cause constipation
- Tylenol Extra Strength
- Ibuprofen 400 mg

You will be asked to stay at the Parkside Hotel (our building), for a minimum of one night (day of surgery). This enables us to monitor and help care for you after surgery. We recommend checking in the day before, if at all possible, to minimize stress on your surgical day. If this is not possible, you may request an early check-in, though this cannot be guaranteed. If checking in the day of surgery, your support person's name must then be on the reservation, as they will have to check in on your behalf. To book your stay at Parkside, please call: 1-855-616-3557, or visit our website. Please mention you are booking under the "clinic 805" rate, and they will give you a discount on your room.

Please ensure your nail polish is removed prior to surgery. If you have gel or acrylic nails, you **must** at the minimum have the polish from your left ring finger removed so you can be monitored during surgery.

DAY OF SURGERY

This procedure is performed under general anesthetic, so you will be required to fast after midnight the night before. You must be discharged from the clinic with a responsible adult (preferably the person who will be helping care for you after surgery). A prescription for pain will be provided if needed. Arrival time for surgery will not be provided to you until about 1-2 weeks prior, so it is important that both you and your support person do not have any other responsibilities that day.

POST-OPERATIVE & LONG-TERM FOLLOW-UP

Activities, positioning, dressings, pain management, and incision care will be reviewed by our clinic nurses. One of them will visit you at the hotel after surgery to help you get settled and teach you and your support person how to care for yourself once you are at home.

Patients *may* be discharged from the clinic with a Foley catheter in place (for approximately three days, as it may be difficult to sit post-op). You will be given instructions on care for this catheter. You may experience a moderate amount of incision discomfort for the first five days. You will be asked to wear a binder (or spandex tights/shorts) to support your incisions and dressings for several weeks post-operatively.

You will be asked to position yourself to minimize tension on your incisions. Because of prolonged immobility post-operatively, your legs may be tensored and we ask that you move your legs periodically in bed to prevent deep vein thrombosis (blood clots). Once your mobility increases, this will no longer be a concern.

Most patients are up and about approximately 5-7 days post-operatively. Our office nurse will see you in follow-up around that time (typically about one week after surgery), and subsequently as required. You will likely have a tape closure over your incisions (called Prineo), which will be removed by the nurse around day 14-21.

You must refrain from strenuous physical activity and heavy lifting (including lifting and carrying your children) for approximately 4-6 weeks after surgery. Most patients return to physical jobs and start to reincorporate physical activity around 4-6 weeks, gradually working up to their preoperative activity level.

Though rare, post-operative complications from any surgical procedure are possible. These may include infection, blood clots in the leg (DVT) or elsewhere, pulmonary embolism, hematoma, seroma, or delayed healing. Altered sensations (numbness, tingling, and/or hypersensitivity) are to be expected while you are healing, and can persist for several weeks or months. Our health care team follows you closely to recognize and treat any complications, should they arise.

As with any surgery, results cannot be guaranteed. The goal of cosmetic plastic surgery is improvement, and perfection is not attainable. Final results depend on many factors and healing can vary from patient to patient. It is important to remember to have patience during convalescence to allow your body time to recuperate and settle.

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Dr. Robinson will assess you approximately 6 weeks post-op and again approximately 6-9 months after your surgery to assess results and take post-operative photographs. If revisional surgery is required, it would be discussed, and a surgical plan set up at this time.