



Matthew H. Steele, MD

Cosmetic and Reconstructive Plastic Surgery

Blepharoplasty Postoperative Instructions

First 24 hours:

You will likely feel some mild soreness along your incisions, as well as slightly tired from the anesthesia. Take your pain medicine every 4-6 hours as needed and the muscle relaxant (if applicable) every 8-12 hours. It is helpful to take a stool softener while on the narcotic pain pills to minimize your risk of constipation. Start your antibiotic (take with food) when you get home and continue as directed. Do not eat spicy foods or any dairy; these can upset your stomach and cause nausea and vomiting. Make sure you are comfortable and your nausea is controlled with the medicine (Phenergan or Zofran). Use over the counter artificial tears such as Refresh or Lacrilube eye gel for any irritation or dryness. Place the topical antibiotic on the incision line twice daily.

Expect bruising and swelling of your eyelids. Ice packs will be very helpful in the first few days- 10-15 minutes, 4-6 x daily. You may have some difficulty opening the eye due to swelling; also, with a lower blepharoplasty, Dr. Steele routinely places a suture between the eyelids along the outer aspect to help with swelling. Keep your activity to a minimal, and sleep elevated on several pillows. You may shower, but keep the incisions and steri-tapes dry. Have someone check your vision every few hours. Blurriness is expected due to the ointments, but a change in vision should prompt a phone call to Dr. Steele. Bleeding is the complication about which Dr. Steele is most concerned. If you notice severe eye pain, loss of vision, excessive bleeding, or severe swelling of one eye (2-3x larger than the other side), you should call Dr. Steele immediately.

Week 1:

You will begin to feel better very quickly. You may drive as long as you are not taking any narcotic pain pills or muscle relaxants. You may switch to Tylenol or Ibuprofen once you feel comfortable. A normal diet can be resumed and you can lay flat after 3-4 days. Activity restrictions include the following: no strenuous activity, no bending, no stooping, no lifting more than 10-15 pounds, and no cardio activity. Keep your blood pressure stable and the heart rate under 100 beats/minute. Slow walking and light household duties can be resumed. No sexual activity at this time. Do not be surprised if you have difficulty fully closing your eyes; this is due to swelling. Use the artificial tears and ointments as needed. You will be seen in the office around postop day 6-8 for suture removal. Once the sutures are removed you may get the incisions wet and go swimming.



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Weeks 2-4:

You can gradually start to increase your activity. After 4 weeks, you have no restrictions. You will notice improvement in the bruising, but swelling takes longer to resolve.

After week 4:

Dr. Steele will check you periodically over the first 3-4 months. Most of your swelling will resolve over this time.

When to call:

Hematoma- bleeding that cause significant asymmetry of the eyes (2-3 x bigger) or severe one-sided eye pain

Corneal Abrasion- severe eye irritation, pain, photophobia (avoidance of light)

Wound separation- wound opens or is slow to heal

Infection- fever (temperature > 101.5F), swelling, redness, tenderness, white pus drainage

Malposition- one eyelid is significantly higher or lower than the other