



Matthew H. Steele, MD

Cosmetic and Reconstructive Plastic Surgery

Facelift Postoperative Instructions

First 24 hours:

You will likely feel some mild tightness and soreness along your face/neck and around the ears, as well as slightly tired from the anesthesia. Take your pain medicine every 4-6 hours as needed and the muscle relaxant (valium) 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). Leave your dressings in place. Keep your activity to a minimal and sleep elevated on 2-3 pillows. Sponge bath only at this point.

Bleeding is the complication I am worried about the most at this time. Some bruising is normal, but you should call Dr. Steele if there is significant asymmetry (2-3 x bigger) on one side of the face or severe pain on one side of the face.

Week 1:

Continue with the restrictions above. You will begin to feel better within 2-3 days. You may drive as long as you are not taking the narcotic pain pills or Valium. During this first week, you may switch to plain Tylenol or ibuprofen. A normal diet can be resumed and you can lay flat after this week. 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. Sponge bath or navy shower keeping the water off the dressings.

Dr. Steele will check you frequently during the first few weeks. The dressings are usually removed after 3-4 days. In some cases a "jaw bra" is placed to provide compression along the neck. Sutures in front of the ear are removed around day 6-8 and drains are removed during this week as well. After the dressings are removed, Dr. Steele will ask you to clean the incision line with peroxide and apply bacitracin antibiotic ointment twice daily. You may wash your hair and get the incisions wet once the dressings are removed and the drains are out.



Matthew H. Steele, MD

Cosmetic and Reconstructive Plastic Surgery

Week 2:

Continue with the same instructions and restrictions as noted above. If you have staples along your hairline, Dr. Steele will remove them around day 10-12. The sutures behind your ear will dissolve and fall out on their own. You may stop placing ointment on the incisions once they are clean without any dried blood or crusts, but continue to treat the dissolvable sutures behind your ear until they are completely gone.

Weeks 3-6:

You may start to gradually increase your activity. Cardio is allowed at 3-4 weeks and you may lift heavy objects (>15 pounds) after 6 weeks. Biocorneum scar therapy may be started once all sutures are out and there are no areas of delayed healing. Gentle scar massage may be helpful and can be started at this time. You will notice resolution of the bruising early on, however the swelling will take 3-4 months for complete resolution.

After week 6:

Dr. Steele will check you periodically to make sure your incisions continue to heal well and that your swelling is resolving on schedule.

When to call:

Hematoma- bleeding that causes significant asymmetry (2-3 x bigger) on one side of the face, or severe pain on one side of the face

Fluid pocket- if you notice a soft, squishy area filled with fluid under the skin

Wound separation- wound opens or is slow to heal

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