

# **BREAST AUGMENTATION**

## **DOCTOR GERUT'S POSTOPERATIVE INSTRUCTIONS**

**NO SMOKING, SEX, LIFTING, STRAINING, ETC. FOR FIRST TWO DAYS, KEEP ELBOWS AT SIDES AT ALL TIMES.** Shoulder motion should be restricted to a minimum. Elbows may bend freely to bring hands to face but shoulders may move only enough to wash under arms. You must not wash your own hair for this causes your arms to move too much. If you move around too much you could cause bleeding or infection. It is critical that you limit your arm motion for the first two days. Even the motion of removing a child-proof cap of your medication can cause bleeding.

**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 around normally. Breathe deeply and cough on purpose during the first three days after surgery to help prevent post-operative lung problems.**

**Please take the medications that Dr. Gerut indicates with a check mark.** Only the medications checked off will be given to you. **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. When you fill your prescriptions, the bottles will be labeled **only with the medical names for your pills** and for your reference, these medical names are in parentheses below.

### **Antibiotic:**

- ☐ **Keflex** (Cephalexin) 500mg (1pill) 2 times a day Or, if allergic to Penicillin,
- ☐ **Vibramycin** (Doxycycline) - 100mg (1pill) 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 pain.

### **Moderate pain:**

- ☐ **Norco** (hydrocodone bitartrate/ acetaminophen)- 1-2 pills every 3 to 4 hours as needed.

### **Nausea:**

- ☐ **Compazine** -Use one if needed. Never use more than 2 in 24 hours. If nausea returns, if weigh less than 160 pounds, call the office before using a second suppository.

### **Constipation:**

- ☐ **Ex-Lax** (or any other mild laxative as needed).

### **Multi-Vitamin:**

- ☐ 1 daily

**YOU WILL GO HOME WITH A STRAP ABOVE THE BREASTS. KEEP THE STRAP ON AT ALL TIMES DURING THE FIRST 48 HOURS.** Do not shower until two days after the surgery. After 48 hours you may remove the strap and bandages to shower **BRIEFLY**. During the shower, the breasts and stitches may be washed **GENTLY** by letting water run on them. Gently pat breasts dry, apply Bacitracin or Neosporin ointment to visible stitches, and then apply new bandages and put the bra and strap back on. **During your first shower, your shoulder motion should be gentle and slow. You should have help for your first shower as you might slip and fall.** Gently pat breasts dry, apply Bacitracin or Neosporin ointment to stitches, and then apply new bandages and put the strap back on.

If post-surgical strap gets too tight, you may loosen it slightly. For best results, it should remain as tight as possible. For comfort, wear a cotton tee shirt or even a sweatshirt under the strap. Be sure not to let the strap irritate the skin under your arms and use padding such as soft socks at sites of irritation. **Do not wear a brassiere until Dr. Gerut allows.**

**It is normal to have pain, swelling and bruising but if there is very severe swelling and/or pain only on one side or if severe pain persists after two days call Dr. Gerut immediately.** Please take your temperature using a thermometer every afternoon and call us if you have a temperature higher than 100.8 degrees.

**NO ICE, HEATING PADS OR HOT WATER BOTTLES OR OTHER TREATMENTS TO SURGICAL AREA AT ALL.**

You will have to sleep on your back for the first several days after surgery.

Expect to be constipated after surgery due to the effects of anesthesia and medications. This will subside with time. Please take Ex-Lax or similar medication to avoid constipation.

Your stitches will dissolve within three weeks after surgery. If they do not, we will remove them. Do not apply any treatments or creams to the surgical area unless approved by Dr. Gerut.

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

You can Acidophilus, Diflucan or Monistat to avoid or treat yeast infection from antibiotics.

After 48 hours you may move your shoulders gently. You may begin limited activity roughly 5 days to one week after surgery and full heavy exercise within about three weeks. Jogging, impact aerobics or other “bouncing” exercises will be permitted after three to four weeks.

Your breasts will be numb at first, then they will become extra sensitive to touch for several weeks to months after surgery and then this will return to normal.

As above, if pain persists after three days, if there is a severe or sudden increase in pain or swelling on only one side or any other emergency please call 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 after surgery to schedule your first postoperative appointment. You should be seen within one week of surgery.

Hardening due to scar encapsulation is a possibility when breast augmentation surgery is performed. Aggressive massage and other physical manipulation can help avoid this. Despite good efforts, it still may occur. Some surgeons believe the anti-asthma medication Accolate/Singular may prevent/treat this scar encapsulation. Other surgeons feel ultra-sound treatment may help. If you wish to have these treatments at any time, please ask. Ultra-sound may be done at a physical therapy office for a fee. We can provide you with a prescription for Accolate, but be aware of the possible side-effects that include: liver failure and death.

Your implants will be very high at first. This is NORMAL. Implants totally under the muscle take time to fall into the proper position because it takes time to stretch the muscle. **YOU MUST** wear the strap and follow instructions :

Starting **2** days after surgery, you **MUST** lie down on the floor, on your stomach, for **30 minutes twice a day**. This should continue for months after surgery. Also, starting **4 to 5 days** after surgery, begin massaging the breasts. This should continue for months following surgery because hardening can happen for months after your surgery. Scar tissue will start to form around your implant beginning right after surgery and the scar tissue will slow down or even prevent the implants from going into proper position even if it does not cause hardening. These manipulations will help the implants into proper position and will help prevent hardening due to scar encapsulation.

Breast implants affect your breast examination as well as mammography. Your personal physician and/or your gynecologist must be told about the implants. You must take extra care to examine your own breasts monthly.

If you wish to be as safe as possible, from now on, you must be treated as if you have a heart murmur:

For any dental treatment other than filling or any surgical procedure, no matter how small, you must be pre-treated with antibiotics, Keflex - or if you are allergic – Vibramycin, 1 pill the night before the procedure, 1 pill the morning of the procedure and 2 pills after, 6 hours apart. Also, you must take antibiotic for: Any infection (urine infection, tooth abscess, etc.) or any significant cold or flu.

I have been made aware of the following possible complications and/or side effects and I accept them (there are others possible that are not listed here):

Bleeding	Thrombophlebitis	Reaction to the sutures
Infection	Hypertrophic Scars	Capsule Formation (hardening)
Need for revisional surgery	Keloids	Skin/scar discoloration
Wound Dehiscence	Chronic Pain	Disability
Skin Numbness	Asymmetry – very likely	Change in breast shape
Seroma	Anesthesia Risks	Parasthesias
Loss of nipple areolar sensation	Nipple areolar malposition	Scarring
Change in Mammogram	Hematoma	Contour deformities
Change of breast shape with chest muscle motion		Spontaneous deflation of implant
Implant can leak and needs immediate replacement		Interference with mammogram
Change in breast self-examination		Malposition of the implant(s)
Need to replace implant after 5-10 years (silicone) even with no leakage		

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It may be necessary for you to communicate with Dr. Gerut by text or email before or after your surgery. This communication may involve sending information about or photographs of yourself over the Internet from which you may or may not be identifiable. By your initials here you acknowledge and accept this potential breach of your privacy.

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For some of the above complications, it may be necessary to remove an/the implant(s) and it may be months before it/they can be safely replaced.

Among other things, significant weight gain or weight loss (change of 10% 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 10% 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.

**For those patients having silicone implants:**

The rupture of silicone breast implants is most often silent (there are no symptoms experienced by the patient and no physical sign of changes with the implant). The FDA recommends that you have an MRI a few years after this surgery and you will need to exchange your implants for new ones after 5-10 years.

It is important that you know that implants are NOT considered lifetime devices and that in the future you will have to replace your implants.

I have read the above instructions (4 pages total) and possible problems fully, all my questions have been answered and I understand and accept the instructions and possible problems fully.

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Patient Signature

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Date

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