CAREOS Discharge Instructions

DATE _____

❑ **Dr. Sean Blaydon** ❑ **Dr. Tanuj Nakra** ❑ **Dr. Vikram Durairaj** ❑ **Dr. Emily Bratton** ❑ **Dr. Marie Somogyi**
❑ **Dr. Brett Davies** ❑ **Dr. Aliza Epstein** ❑ **Dr. Donovan Reed**

Office (512) 458-2141 (M-F 7:30 am-5pm)
After hours & weekends (512) 533-7355

CALL IMMEDIATELY FOR THESE PROBLEMS:

- **Pain not controlled by medication.**
- **If you notice rapid swelling or blood dripping from the incision.**
- **Any evidence of infection, such as fever > 101° F; increasing pain, purulent discharge from incisions.**

NORMAL EXPECTATIONS

- You may have some temporary oozing of blood from the incision sites overnight.
- Expect some swelling and bruising. Bruising is usually more visible 1-2 days following surgery.

COLD COMPRESSES

❑ Apply cold to the area for _____ days after surgery about 20 minutes of each hour till bedtime.
Place dry cloth over the area, and then crushed ice or frozen peas in a clean quart size Ziploc bag.

MEDICATIONS

❑ Apply _____**ointment** sparingly on the stitches/staples _____ times daily for 7 days.
❑ Take prescription **pain** medication for moderate pain. Tylenol/Extra Strength Tylenol for mild pain. Take pain medication with food to avoid nausea.
❑ ***You were given pain medication in the surgery center. Next dose of pain medication at _____.***
❑ **DO NOT** take Aspirin, Aspirin containing products or anti-inflammatory medications (NSAIDS e.g. Advil, Motrin, Aleve, etc.), for 2 days after surgery.
❑ ***Blood thinning medication such as Coumadin, Plavix or Aspirin can be restarted on _____.***
❑ Other medications: ❑ Promethazine as needed for nausea. Next dose: _____
❑ Medrol Dose Pack starts _____

ACTIVITY

❑ Rest as much as possible after surgery. Sleep with head slightly elevated for first 2 nights.
❑ Avoid bending or any heavy lifting (>20 lbs) for 7 days. You may resume aerobic activity in 7 days.
❑ You may return to work/school in _____ days.
❑ **Do NOT drive** while vision is impaired or while taking prescription pain medication.

HYGIENE

❑ You may shower ❑ 24 hours ❑ 48 hours after surgery.
❑ Makeup**:** _____
❑ If you had oral incisions, irrigate the sutures with diluted peroxide rinses twice a day for one week.
❑ _____

DIET

❑ Resume regular diet. No alcoholic beverages the day of surgery or while taking prescription pain medication.
❑ Drink adequate fluids to stay well hydrated in the days after surgery.
❑ _____

OTHER_____

FOLLOW UP APPOINTMENT _____days. ❑ **PLEASE CALL 512-458-2141 FOR APPOINTMENT**

I have received and understand these instructions. _____ _____
Patient / Representative Reviewed by

If you have questions **immediately** after surgery**, call CAREOS M-F 7am – 4 pm at (512) 458-4391.**

Revised June 2019