



Care Instructions: Breast Augmentation

General

Breast augmentation is sought to enhance breast fullness and create an enlarged, proportional, and natural appearance. Breast augmentation increases self-confidence, balance, and proportions; this is manifest by larger bra cup size, cleavage, and fullness. Most commonly breasts are augmented using implants placed under the breast tissue or the chest muscles for a natural appearing result. A small incision is placed underneath the breast, but several access options exist.

There are a variety of types, size, shapes, and styles of breast implants. We will review these options, and come to a decision together with you, based on your body-type, goals, and benefits. In some occasions, your breasts can be augmented using fat (liposuctioned) from other parts of your body and transferred to your breasts. This is a natural breast augmentation. Breast cosmetics involves a host of considerations and personal preferences. We will walk you through these choices/options. In some cases a breast “lift” may be required in addition to implants (breast augmentation mastopexy) to achieve the desired goals, shape, and position.

Indications for breast augmentation: You may be a good candidate if: you are physically healthy, you have realistic expectations, your breast are fully developed, you are bothered by the feeling that your breasts are too small, you are dissatisfied with your breasts losing shape and volume after pregnancy, weight loss, or with aging, your breasts are asymmetric (or your breasts have different size and shape from each other), one or both breasts failed to develop normally.

Imaging and 3D: We will take several regular photographs at several different angles. As you enter your first visit we have you sign a consent for these photos and their uses. We have a 3D camera machine (photographic, NOT X-ray), that we will use to capture an image of your existing breast appearance. Evaluating this from many angles enables a clear picture of areas of balance and imbalance, and the proportions. The 3D camera also enables us to take measurements, and to choose possible implant sizes. We can simulate various implant size options and compare to your existing state to help make decisions relating to your goals and outcome. We will show you many before and after examples and point you to our sources where you can review these images at your leisure as well.

Factors that influence healing and time to see the ultimate result: There are several factors that influence the final result. First, in all cases there is swelling (and occasionally bruising) for the first week or two. The swelling is mostly on the upper pole (or half) of the breasts. The majority of the swelling is resolved by 1-2 weeks, and as it comes down the breast take on a more natural shape. Additionally, the bruising is usually gone by 1 week. A breast augmentation alone will not change the size of the areola or nipple. If changes are sought here, we may need to consider a mastopexy or other modification. Everyone has some degree of asymmetry to begin with, and a breast augmentation (though it can be done differentially, one side to the other), is not expected to fully correct side to side differences. In cases where there is skin excess or stretch marks, these cannot be wholly corrected using breast augmentation alone. Another consideration is the scar. In all cases a scar will be created, but we hide these as best possible in inconspicuous locations. All scars begin somewhat red and



then fade with time. The fading depends on your genetic healing potential, but also the creams and scar care modifications we recommend – and adhering to those.

Implant Options: There are several types, sizes, and profiles of breast implants that can be used. The 3D imaging program can help simulate and determine the best option for you. There are also “rice tests” and sample implants that can be used to help make a decision on size and profile. Additionally, there is a broad categorization looking at saline versus silicone implants.

- **Saline Implants:** FDA approved for women 18 years and older. They can be placed via a smaller incision, tend to be less expensive, but feel less natural. The shell is still composed of a silicone material, but the inside is filled with salt water. Should the implant shell leak the implant will collapse and the saline will be absorbed and expelled by the body.
- **Silicone implants:** FDA-approved for women 22 years of age and older. They require slightly larger incisions, are slightly more expensive, and feel more nature. The shell is silicone, and it is pre-filled with an elastic gel. If the shell leaks the gel may stay within the shell, or may escape into the breast implant pocket – and the implant will not collapse. Additionally, imaging, using ultrasound or MRI may be required at intervals to check on the integrity and function of these implants.

For ***small breast volume enhancement Fat Grafting to the breasts may be a good option for you*** – and can be coupled with suction from other parts of your body.

Note: if there is breast asymmetry, or developmental condition in women of a younger age, either silicone or saline implants may be used for these indications when younger than 18 or 22. Also, breast implant are not guaranteed to last a lifetime and future surgery may be required to place one or both implants. Pregnancy, weight loss and menopause may influence the appearance of augmented breasts over the course of your lifetime.



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General Pre-operative information

Medical history: Please inform us of any major medical problems. We will perform a history and physical but in some cases a clearance from your other specialists, and our anesthesia department may be required. Please inform us of any auto-immune problems, diabetes, healing problems, bleeding problems, bone disorders (e.g., osteoporosis or osteopenia), or respiratory problems, sleep apnea/snoring. Please let us know if you have **high blood pressure** or heart conditions, or past surgery or issues with your eyes.

Medications: **NO blood thinners – no aspirin, NSAIDS, ibuprofen, or similar medications BEFORE SURGERY.** Do NOT take these prior to surgery. These can increase bleeding. Please do NOT take these for at least 2 weeks prior to surgery. If your primary doctor has you on these for a specific reason we will coordinate with you and them. We will screen your medication list. We may give you NSAIDS, specifically ibuprofen after surgery, but please do not take prior to surgery. **We may give you a medication to decrease your blood pressure – if it tends to run high.**

Pre-Anesthesia Testing. (PAT). In certain circumstances you will need to meet a member of our anesthesia staff prior to surgery. Also, certain tests, such as an EKG, and labs may be obtained prior to surgery. A clearance from your primary doctor and modification of your existing medication schedule may be required. If you are young, healthy, with no medical problems and few medications this might not apply to you.

Foods / Supplements to Avoid Prior to surgery: Avoid onion, garlic, tomatoes, and ginseng, or other herbal supplements prior to surgery. Avoid fish oil. Avoid herbal teas (green tea is good/fine). (Arnica and pineapple juice are both good preoperatively).

Smoking: **Do NOT smoke for 4 months before and 4 months after surgery.** Smoking will decrease your ability to heal and will increase your risk for infection. Also, the heat and sucking in of hot smoke can have ill-effects on your lips (that we may have adjusted surgically).

General care and washing prior to surgery: Please remove nail polish or nail gel before surgery. Please use hibiclens cleansing soap along your breasts and underarms – beginning 1-week prior to surgery. Please remove any nipple piercings (if possible) at least 1-week before surgery.



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PREPARING FOR THE DAY OF SURGERY

You will receive a phone call from our office letting you know you what time you should arrive for surgery. Our nursing staff will be in touch to review questions and medications as well. If you ever have additional questions please email or call 203-453-6635

The day of surgery, plan to arrive 1-2 hours prior to the scheduled start time. A member of the surgical team will reach out to confirm the time of arrival with you the day or two before. Please contact Remember: **NO FOOD OR DRINK AFTER 12 MID-NIGHT THE NIGHT BEFORE SURGERY.** You and your family will meet with the nursing, anesthesia, and surgical team members. We will answer any final questions. **Tell us / anesthesia if you have a history of motion sickness** or nausea with anesthesia; please tell the anesthesia team – we take several measures to reduce nausea and vomiting, and they may wish to add a motion sickness (Scopolamine) patch behind your ear.

LENGTH AND STAY

The operation usually takes 1 hour or less if performed alone. It is a same-day surgery – meaning you go home the same day.

*If you are from out of town, we will help arrange accommodations, and we can arrange the possibility of a nurse checking on you (or staying with you).

General

- You may shower after 1-2 days after surgery. Please avoid direct stream of water to the breast incisions, please leave the dressing, and pat it dry.
- **Bra:** We will place a surgi-bra postoperatively. The clasps are usually in the front for eas of removal (and without need to raise hands above head). Typically wear the surgi-bra for the first week. After this period of time you can switch to a comfortable sports bra WITHOUT underwire. We do not want wire pushing on any areas near the incision.

Diet

Generally, only a “clear liquid,” or bland diet should be taken for the first 24 hours after surgery, as anesthesia can cause an upset stomach. This includes items such as clear juices, broths, Jell-O, and dry crackers. Pineapple juice has also been shown to reduce swelling/bruising. After 24-48 hours, a regular diet can be resumed as tolerated.

Medication

- Antibiotics are typically given during surgery and continued for 1 week at home. We will give you a prescription when you are discharged.
- We will give you a prescription for oral pain medication at discharge. For safety, the medication dose is weight based.
- Muscle relaxant – we usually give you a muscle relaxant to take during the day and night for the first few days after the procedure. And then just at night/bedtime after the 3rd day postop. (This will help calm down any pectoralis muscle spasm).
- All medications should be taken as directed.



Topical Ointments

You will have dissolving sutures at the breast incision. A steri-strip bandaid, and additional dressing will typically be placed to protect this area. This should stay in place for the first 1-2 weeks. Once the steri-strips fall off (you can peel them off once the corners begin to raise up at 1-2 weeks), please apply bacitracin ointment 2x/day for 2 days, and/or Vaseline or Aquaphor for another 2 days. At this point, 4-5 days after the steri-strips have come off, please move to Scar care regimen.

Scar care: Begin 4-5 days after the steri-strips are removed. Please alternate between – **Green tea** containing cream (please ensure no parabens), and **Vitamin E** containing creams (i.e., morning green tea, midday Vitamin E, evening green tea, bedtime vitamin E). After 7-10 days of these creams you can use a silicone based ointment. Silicone strips can be used – placed and left for 24-48 hours, then removed, and either another strip replaced or a few days of the creams (as mentioned above), then back to the strips. *Mederma* or similar represents the silicone scar gel and strips that can be used.

POST OPERATIVE SWELLING AND BRUISING

- The amount of swelling varies from patient to patient and cannot always be predicted.
- Swelling increases first 2-3 days and begins decreasing until the end of the second week.
- We do several things to help lessen the edema
- Ice packs are helpful the first 2-3 days after surgery.
 - Please place ice packs on the top portion and middle of your chest region.
 - 15-20 minutes on the hour can help lessen soreness and upper pole swelling.
- Traumeel ointment apply to the breast/chest muscles 2-3x / day.
- Arnica pills or tabs 3x/day; also Bromelain tabs 2-3x /day
- Anti-inflammatory medication (steroid type) (Medrol dosepack, usually only after first week)
- Keeping upper body elevated.
- Stay upright and walk around. (not with exertion and sit up slowly)

MASSAGE

After 5 days postoperatively you can gentle, with open palm of hand sweep down from your upper chest wall (pectoralis muscles) down toward your feet. You can also sweep the breast together toward the middle (cleavage area). The top down massage will help calm the pectoralis muscle swelling and help the implants “drop” to a more normal, natural appearance.

Activity

- Keep your upper body elevated with 2-3 pillows.
- DO NOT sleep on your tummy.
- Stay upright and walk around early. Sit up slowly, and don't overdo it. If you feel dizzy sit again. Ensure you are drinking enough and sit up and walk slowly without much exertion.



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- You can SHOWER / BATHE at 1 day after surgery. Please do not shower right after taking narcotic pain medicine, and make sure you are well hydrated. Ensure the shower water is not too hot. Please have someone around to help you if needed, the first couple days after surgery.
- DO NOT Squat or stoop. And minimize or have someone help if climbing stairs after surgery.
- NO Strenuous aerobic activity, NO lifting over 5 pounds should be avoided for 2 weeks.
- Your arms may be tired or sore if you elevate them to your shoulders or above.
- NO contact sports for 2-3 weeks.
- Patients may feel up to returning to work after 5-10 days; but it depends on your specific job and the activities you perform at work. Discuss this with us at your visit.

Follow-up

The first follow up appointment is usually 7-10 days post-operative. At this visit, we will assess the surgical site. We typically recommend additional follow-up visits at approximately 6 weeks, 3 months, 6 months and 1 year from your date of surgery.

For additional information and before and after examples please visit:

<https://dereksteinbacher.com/breast-augmentation/>

Office Phone: 203-453-6635

Office Fax: 203-458-7580

Concerns and Contacts

Please call or message us for assistance/concerns, such as persistent fever (greater than 101 degrees), excessive drainage or bleeding, difficulty breathing or new onset swelling.

In case of an emergency, call 911.

