



Care Instructions: Hardware or Facial Implant Removal

General

Hardware in the facial skeleton is typically removed in our practice following orthognathic surgery; or occasionally from a prior trauma or reconstructive procedure. Hardware is removed for a variety of reasons including patient preference or desire, palpability, chronic irritation, infection, or exposure. Titanium hardware is also well tolerated and in many cases may stay forever and not need to be removed. Facial implants, frequently for cosmetic reasons, including cheek or jawline, or chin implants, can be removed for similar reasons, and or capsule or scar formation around them, or dissatisfaction with the aesthetic component. For whatever the reason removal of hardware is typically well tolerated, although there will be some expected swelling and recovery time.

Factors that influence healing:

There are several factors that influence healing. First, in all cases there is mild to moderate swelling, and it remains swollen for several weeks following surgery, usually just limited to the few centimeter area in front of the ear. Swelling is worse during summer and hot months. We will give you instructions on ointments and treatments to help minimize or reduce swelling, or cause it to resolve sooner.

Having past trauma and scars to the skin can healing jeopardize healing and appearance. Some people develop thicker scarring (or fibrosis) underneath the skin that may lessen the shapeliness. We utilize several techniques to try and avoid this, but healing potential is intrinsic to one's own genetics and cannot always be altered.

Secondary procedures (if you've had a prior trauma or TMJ procedures) can be more challenging; and not as predictable, given the scarring, altered perfusion to tissues.

Smoking, diabetes, history of infections (nasal, skin, sinuses), and other conditions can potentially alter your healing. If you are excessively preoccupied appearance, we may have you take a brief survey and have discussions with some of our collaborators prior to deciding on surgery as well.

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., osteoposis or osteopenia), or respiratory problems, sleep apnea/snoring. Please let us know if you have **high blood pressure** or heart conditions.



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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 the 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. All/any medications may be considered in a liquid form or crushed. 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. Male patients should shave their face prior to the procedure (morning of or night before).

PREPARING FOR THE DAY OF SURGERY

You will receive a phone call between a day or so before your surgery telling you what time you should arrive. If your surgery is scheduled for a Monday, you will receive your call the Friday before. If you do not receive this call, please contact us at 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

The operation usually takes 1-1.5 hours (or longer or shorter depending the amount, location and complexity of hardware being removed). It is a same-day surgery.



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*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

- Typically this is done inside the mouth and all incisions will be inside.
- Please apply Vaseline or bacitracin to lips to keep them moist.
- We may wish you to wear a face-bra for a period of time
- You may shower after 1 days but please be careful with direct stream of water to the site.
- Cleaning your face with soap and water.

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. Soft food may be initially indicated for the first week, but then you can advance as tolerated. (if there was any concern with bone healing we will let you know).

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.
- We may give you a muscle relaxant to take as well.
- All medications should be taken exactly and only as directed.

Topical Ointments

For the first few days postoperative please keep lips moist with aquaphor, Vaseline, or bacitracin.

POST OPERATIVE SWELLING

- The amount of swelling varies from patient to patient and cannot be predicted.
- Swelling increases first 2-3 days and starts going down by the end of the second week.
- We do several things to help lessen the edema [Ask to see our papers on fat grafting and edema].
- Facial ice packs are crucial the first 2-3 days after surgery.
- WE RECOMMEND ICED GREEN TEA BAGS to the eyes.
- Arnica and vitamin K cream (topical), pineapple juice (drinking it) can help
- Traumeel ointment apply to the face 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 head elevated.
- Stay upright and walk around. (not with exertion and sit up slowly)
- Lymphatic facial massage before surgery (possibly after).

COLD PACKS FOR POST-OPERATIVE SWELLING

Cold packs are very important in the first 48 hours after surgery to reduce post-operative swelling. Use them 20 minutes on, 20 minutes off, to prevent damage to the skin. After 48 hours, you may still apply cold packs for comfort, but the therapeutic value will be diminished.

Below are suggestions and comments regarding various types of cold packs:

Green tea bags These are ideal for swelling and bruising around the eyes. Steep these in hot water in advance, and then place into the freezer. These can then be placed over your closed eyes.

Retail Cold Packs There are often several types of cold packs for sale in the first aid section of the drugstore. Unfortunately, they are usually somewhat stiff and not designed for small, delicate areas like the nose and eyes. They may be uncomfortable to use and challenging for you to position in such a way that the cold pack makes enough contact to be effective.

Frozen Vegetables Another commonly used cold pack is a bag of frozen vegetables. Small vegetables like peas work best, because they can conform to the shape of the nose or other body part. However, the vegetables will start to degrade from repeated defrosting and refreezing. You should not eat the vegetables after using them for cold packs.

Bruising

Bruising may occur within 3-5 days after surgery and usually disappears by 2-3 weeks.

- Arnica and Vitamin K (topical) and Pineapple juice (drinking it) can help it resolve
- Traumeel ointment to face 3x/day.
- It is normal to have bruising and swelling around your eyes, as well as numbness of the area following surgery.

Activity

- Keep your head elevated with 2-3 pillows for 2-3 days.
- Stay upright and walk around – helps the swelling drain. 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.
- You can SHOWER / BATHE at 1-2 days after surgery – but make sure a family member can assist you. Please have someone help you and consider sitting if possible.
- 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 1 week – 10 days.
- Patients may feel up to returning to work after 4-7 days; but it depends on your specific job and the activities you perform at work. Discuss this with us at your visit.



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Follow-up

The first follow-up appointment is usually approximately 7-9 days post-operative. We then usually recommend follow 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://www.instagram.com/dereksteinbacher/?hl=en>

Office Phone: 203-453-6635

Office Fax: 203-458-7580

In the event, you have urgent concerns please contact or message us.

Concerns and Contacts

Please call 203-453-6635 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.

