

Postoperative Care  
Rhinoplasty (Nasal Surgery)

Facial Plastic Surgery  
Oregon Health & Science University

You have just had a “rhinoplasty” or surgery on your nose. There are incisions inside your nose, and in some instances a small incision in the tissue between your nostrils. All of your incisions, inside and outside, have been closed with dissolving sutures. The cartilage in your nose, and often the bones, have been carved apart, then reshaped and repositioned. There is no packing in your nose. You have a molded plastic “splint” glued to the outside of your nose. The purpose of the splint is to hold your cartilage and bone in their new position while they heal together, to minimize the swelling that you will have, and to protect your new nose.

This guide is written to provide you with instructions for the care of your new nose and to answer questions that you inevitably will have as your healing progresses. Please keep these instructions on hand for at least the next month as a reference source. And don’t hesitate to call our service (see below) if you have questions that are not answered here in print.

Enjoy your new nose!!

I. Activities

1. For tonight and tomorrow night, please sleep on your back with your head elevated on two pillows. Sleeping in a recliner chair is ideal. If you sleep on your side your nose will swell closed on the “down” side. Continuing to sleep on your back with your head slightly elevated for the next week is preferred.
2. Please keep ice packs across the plastic splint on your nose and both of your eyes until you go to sleep tonight and all day tomorrow. This is to prevent bruising of your eyes, minimize swelling of your nose and face, and to generally make you more comfortable.
3. Your nose will drain some mucus and a bit of blood for the first day or two after your surgery. This is perfectly normal. We will send you home with a drip pad of gauze under your nose to absorb this drainage. Please change the gauze as needed. We will clean out your nose the morning after your surgery. Don’t blow your nose for a week, but you may sniff backwards if needed.
4. You may walk as much as you like. For a week please do not run or do any aerobic exercises. Also, for the first week, do not lift anything over 10 pounds (including a child), do not bend forward with your head down, and do not strain in any way. For this first week, sexual activities should be very limited. After a week, you may return to all your normal activities. Please ask our staff if you have concerns regarding any specific activity.
5. You may wear your glasses lightly resting on your nasal cast or taped to your forehead. Our staff will show you how to manage this. Please wear the lightest weight pair of glasses that you have. You may insert your contact lenses two days after surgery. After removal of your nasal splint at a week you should limit the time that you wear your glasses and continue to wear light-weight glasses. Do not wear plastic-framed glasses that rest all the way over the top of your nose. If you have very small “feet” on your glasses resting on your nose, you may wish

to ask your optician to install larger, softer “feet.” You may expect some tenderness or discomfort on the sides of your nose after you’ve worn your glasses for a length of time. This is perfectly normal and may last for 3-4 months. When your nose becomes tender, remove your glasses for an hour or two. Once again, please contact our staff if you have any questions regarding your glasses or contact lenses.

6. Please do not drive for 24 hours after your surgery. Until that time, you will still be affected by the drugs you were given during your surgery, and it is not safe for you to drive. After a day you may drive limited amounts.

## II. Diet

You may eat a normal diet after your surgery. You may find that swallowing solid foods is a bit difficult while your nose is stuffy. Your sense of smell may not be too good for the first week but will soon return to even better than before. Please do drink lots of liquids to help your body recover from your anesthesia and your surgery.

## III. Medications

1. You will be given pain medications to take only if you need them. Do not take them more often than instructed, and do not take them if you do not feel pain. These pills contain a mild narcotic and may make you light-headed or even nauseated. We would prefer that you take one or two over-the-counter 200-mg ibuprophen tablets every four to six hours if this controls your discomfort.
2. You may be given antibiotic pills to take. If you are given them, please take them as instructed, as they are important for proper healing. And take them until they are completely gone.
3. You may be given cortisone (steroids) to take for a week. This is to help reduce swelling and discomfort. Please take them exactly as the instructions are written.
4. You may be given a packet of Arnica Montana pills to take to help prevent bruising. Please take them exactly as instructed on the package.
5. Please resume taking all of your normal medications the day after surgery. It is wise to take a daily multivitamin pill during the month after surgery.

## IV. Wound Care

1. You may sniff backwards through your nose at any time. But please don’t blow your nose for a week after your surgery.
2. You will be asked to start using saline spray in your nose the day after surgery. You can purchase saline spray over the counter in your drugstore. Any brand will be acceptable; Ayr and Ocean Spray are common brands. You should use two squirts in each nostril at least four times a day. And you may use it as often as you like. The saline reverses the drying effect that the surgery has had on your nasal lining and should be used for at least the next three months. Do not use any other sprays in your nose unless you’ve been given specific instructions to do so by our office. Please do contact us if you have any questions in this regard.
3. If you do have a small incision in the tissue between your nostrils, we will give you an ointment to apply there. You should apply the ointment three times a day with a Q-tip and rub it in well. We have used dissolving sutures to close your incision, but the sutures dissolve only if kept moist with ointment. Continue to

apply the ointment three times a day until the sutures have wiped away – at about a week.

4. You may have had some cartilage borrowed from your ear to put into your nose. If so, the incision in the rim of the bowl of your ear has been closed with the same dissolving sutures used in your nose. Apply the ointment to your ear sutures three times a day with a Q-tip and continue to do so until all the sutures wipe away in about a week. You will also have a dressing on the front of your ear, and one on the back. These dressings are sewn to your ear, and we will remove them on the day after surgery. Don't try to remove or change these dressings.
5. If you have had an implant inserted into your chin, you will have a dressing taped onto your entire chin. Once this dressing is removed, you should begin to apply ointment to the incision line under your chin three times a day until the sutures wipe away in about a week.
6. The plastic mold or splint on the outside of your nose will be removed by us at about a week after surgery. You may wash your face and shampoo the day following surgery. It will not cause damage if your nasal splint dressing gets a bit wet, although we ask that you not run water directly onto the splint. Similarly, you may wash around all of the incisions in your face the day after surgery. If they happen to get wet this will cause no problems.

#### V. Visits to Our Office

1. The day after surgery you will be seen in our office in the Physician's Pavilion, your nose will be gently cleaned out, and you will be started on nasal saline spray. If you have a dressing on your ear, that will be removed during this first visit.
2. One week after your surgery we will again see you in our office. At this time, your outside nose splint will be removed and your nose once again gently cleaned out.
3. Your next visit will be at one month after your surgery.
4. Normally, we will then see you at 3, 6, and 12 months after the surgery. There is no charge for these visits. You may have postoperative pictures taken at these visits.

#### VI. Long-term Care

1. Swelling of your nose and the surrounding areas of your cheek and upper lip is the normal result of your nasal surgery. The swelling will gradually resolve over varying time periods. Swelling at the upper part of your nose between your eyes that is present when your plastic mold is removed should be gone by the end of the second week. The same is true for the minor swelling of your cheeks at the sides of your nose. You may have some swelling in your upper lip (and even under your upper lip above your teeth) at the bottom of your nose. The mild tenderness and swelling here, too, will be gone within two weeks. There may well be minor swelling and a feeling of stiffness in the tip of your nose that persists well beyond the two-week period. In many cases, the tip may not be as delicate-appearing as we want it to be for up to six months after surgery. In some cases, we may inject a small amount of a form of cortisone into the tip to help in resolving this swelling.
2. Bruising around your nose in your cheeks and lower eyelids is very common after rhinoplasty surgery. It should be completely resolved by two weeks after

surgery. If this bruising presents a problem in your return to work, we can provide you with some cover-up make-up.

3. Numbness over your nose is also quite normal following surgery. You will gradually regain sensation over the top of your nose. But you can expect the tip to be slightly numb and “stiff” feeling for up to three months after surgery.
4. Breathing through your nose will gradually improve after we clean your nose out the day after surgery. By a week after surgery your breathing should be much improved. It is vital in returning to normal breathing that you spray the inside of your nose frequently with saline spray.
5. You may be instructed in a set of Nasal Exercises. These exercises are intended to keep your nose narrowed and straight as the nasal bones heal back to the facial bones. If you are instructed in using these exercises, please be diligent in using them for the first month after your surgery. In most cases they are not needed beyond that time.
6. You must protect your new nose from the sun for three months after surgery. Sun exposure will cause swelling in the nose and will retard the healing process. The skin of your nose will actually be very likely to burn from sun exposure. Good protection for this three-month period means both a brimmed hat and a sun block of at least SPF 15.

VII. For any other questions that may arise, please do not hesitate to contact us at the numbers below. We would far rather answer your questions than to have you worry perhaps needlessly. And we very much hope that you enjoy your new nose in both function and appearance.

Contact telephone numbers:

Secretary:	Marie Widestrom	503/494-5678
Aesthetician:	Kay Ford	503/494-6340
After Hours:	Resident	503/494-9000
Facial Plastic Surgery Fellow		503/494-9000
Ted A. Cook, MD		503/494-5678
Tom D. Wang, MD		503/494-8027