You have just had a “rhinoplasty” (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 the incisions (interior and exterior) have been closed with dissolving sutures. Some cartilage and bone in your nose have been carved apart, then reshaped and repositioned. There is no packing in your nose (although there may be soft splints). You have delicate tape and possibly a molded-plastic splint glued to the outside of your nose. The tape and splint hold your cartilage and bone in the new position while they heal together. They also help minimize swelling and protect your new nose.

This guide provides instructions for the care of your new nose and answers questions about the healing process. Please keep these instructions for at least the next month as a reference source. Don’t hesitate to call our office if you have questions.

Enjoy your new nose!
Activities

For tonight and tomorrow night, 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. Continue to sleep on your back with your head slightly elevated for the next week. Neck pillows commonly used by travelers can be helpful to maintain neutral head position during the recovery period.

Keep ice packs across the splint on your nose and both 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.

Your nose will drain some mucus and a bit of blood for the first day or two after your surgery. This is normal. We will send you home with a drip pad of gauze under your nose to absorb this drainage. Change the gauze as needed. You may be provided with some saline nose sprays to help maintain interior nasal moisture. For the first week after surgery, you may spray, sniff in, let liquid run down the back of your throat and then spit out. This will also help rinse debris from within the nose. We will clean out your nose at the first postoperative visit. Don’t blow your nose for a week, but you may sniff backwards if needed.

For the first week, do not lift anything over 10 pounds, bend forward with your head down, or strain in any way. Also, do not run or do any aerobic exercise that first week, however, you may walk as much as you like. After a week, you may return to all your normal activities. Please ask our staff if you have concerns regarding any specific activity.

You may wear your glasses lightly resting on your splint or taped to your forehead. (Our staff will show you how to manage this.) Wear a lightweight pair of glasses. You may use your contact lenses two days after surgery. After removal of the nasal splint, you should limit the time that you wear your glasses and continue to use a lightweight pair. 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 can expect some tenderness or discomfort on the sides of your nose after you’ve worn your glasses for a length of time. This is 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.
Please do not drive for 24 hours after your surgery. Until that time, it is not safe to drive because you are still affected by the medications you were given during surgery. After a day, you may drive limited amounts.

**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 be reduced for the first week, but should soon return. Please drink lots of liquids to help your body recover from anesthesia and surgery.

**Medications**

You will be given a prescription for pain medications to take only if you need them. Don’t take them more often than instructed, and don’t take them if you aren’t in pain. These pills contain a mild narcotic and may make you light-headed or nauseated. If discomfort is mild, take one or two 200 mg ibuprophen tablets every four to six hours. You should not drive while taking any of the prescribed narcotic pain medication.

You will be given a prescription for antibiotic pills to be taken after surgery. Please take the medication as instructed for proper healing. Take the antibiotics until they are completely gone.

You may be given cortisone (steroids) to take. This medication helps reduce swelling and discomfort. Please take exactly as the instructions are written.

Resume taking all of your normal medications the day after surgery. We also suggest taking a daily multivitamin for a month following surgery.

**Wound Care**

You may sniff backwards through your nose at any time, however, please don’t blow your nose for a week after surgery. Start using saline spray in your nose the day after surgery. You can purchase saline spray over-the-counter in a drugstore. Any brand is acceptable; Ayr and Ocean Spray are common brands. Use two squirts in each nostril at least four times a day and as needed. The saline reverses the drying effect that 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 contact us if you have any questions in this regard.
If you have a small incision in the tissue between your nostrils, we will give you an ointment to apply there. You should apply the ointment gently three times a day with a Q-tip. We 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 in about a week.

You may have had some cartilage borrowed from your ear to put into your nose. If so, the incision on your ear has been closed with the same dissolving sutures used in your nose. Apply the ointment to your ear sutures (these might be on the front or back of the ear) three times a day with a Q-tip and continue to do so until all the sutures wipe away in about a week. You may also have a dressing on the front and back of your ear. Don’t try to remove or change these dressings.

If you had an implant inserted into your chin, you may 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.

We will remove the nasal splint on the outside of your nose approximately a week after surgery. You may wash your face, shower and shampoo your hair the day following surgery. It won’t cause damage if your nasal splint dressing gets a bit wet, but don’t 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 not cause a problem.

**Visits to Our Office**

You will return to our office at the Center for Health & Healing the week after surgery. At this visit, your nose will be gently cleaned out, the splint removed and you will start using nasal saline spray. If you have a dressing on your ear, that will be removed during this first checkup.

Your next visit will be one month after your surgery. Typically, we will then see you periodically within the first year, with checkups at three months, six months and 12 months after the surgery. You may have postoperative pictures taken at these visits.

**Long-term Care**

Swelling after surgery is normal and will gradually resolve. After the splint is removed, the swelling at the upper part of your nose between your eyes should diminish by the end of the second week post-surgery. 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. This mild tenderness and swelling will also be gone within two weeks. There may be minor swelling and a feeling of stiffness in the tip of your nose that persists 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 an anti-inflammatory drug into the tip to help resolve this localized swelling.

Bruising around the nose, cheeks and lower eyelids is very common after rhinoplasty surgery. It should completely resolve by two weeks after surgery. If this bruising presents a problem for your return to work, we can provide cover-up makeup.

Numbness over your nose is also normal following surgery. You will gradually regain sensation over the top of your nose. You can expect the tip to be slightly numb and “stiff” feeling for up to one year after surgery.

By a week after surgery, breathing should be much improved. Frequently spraying the inside of your nose with saline spray is vital to returning to normal breathing.

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. Please be diligent in using the exercises for two to three months after your surgery. In most cases, they are not needed beyond that time.

Protect your new nose from the sun for three months after surgery. Sun exposure will cause swelling in the nose and will slow down the healing process. The skin of your nose will be prone to burning from sun exposure. During this three-month period, use both a brimmed hat and a sunscreen with at least SPF 15.

Questions
For other questions that may arise, please don’t hesitate to contact us at the number below. We hope you enjoy your new nose in both function and appearance.

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