

# 24 Hour Breast Augmentation Recovery Plan

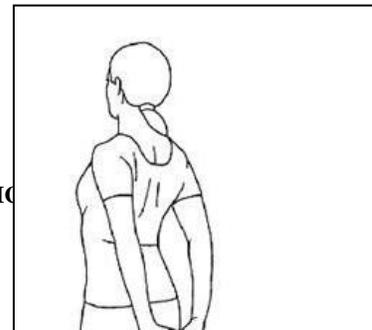
## Guide for a 24 hour recovery after Breast Augmentation

Garrett A. Wirth, M.D., M.S., F.A.C.S

The secret to a successful 24 hour recovery lies in **COMPLIANCE!!!** This system has worked for many before, but the key is to **NOT** deviate from these instructions and the **ORDER** in which are listed. Keep the breast strap (bandeau) on at all times except in the shower.

1. When you leave the surgery center, the time clock starts! We want you to go home and take a 2 hour nap. Set a timer to wake up and then get moving. No more sleeping today. It is fine to sit down and rest, but no more napping until bed time.
2. Next, make sure she eats something substantial at a nice pace. Crackers are simply not enough, and eating too fast won't help.  
If she were going to get sick from the anesthesia, it would have already happened. Nausea usually occurs within the first 3-4 hours after surgery, which she has now peacefully slept through!  
*If she feels nauseous, it is usually either because she took her medicine on an empty stomach or she is not drinking enough fluids. Make sure she eats something real- whatever she is craving. Make sure that she is doing more than taking just a sip of something here and there. If she normally drinks a diet coke, make her drink a real coke- or something with sugar. We need to jump start her system.*
3. As soon as she has eaten, give her 1 pain pill and keep sipping on some water.
4. *Wait 30 minutes and get her to the bathroom to wash her face and gently wash off the purple marking lines between her breasts, but NOT under the breasts.* The washing is excellent to loosen things up, help wipe away the fog from anesthesia, and gently washing her gets her arms moving.

5. After the wash, she should gently dry herself, and



- then we want her to do simple stretches as demonstrated to her. Hold both hands together behind the back, then stretch the hands toward the floor. This should cause the shoulders to rollback and open up the front of the chest. (The goal is a soft stretch of the pectoralis (chest) muscle, so she does not get any cramps.
6. The next step is most important: **GET HER OUT OF THE HOUSE**; take her out to shop or walk around the mall. Take her out to dinner. We expect her to close her own car doors and put on her own seat belt. A change of scenery is a wonderful thing!
  7. Try to keep her up until at least 10:00pm.  
If you must stay home, encourage her to do some normal things around the house. (Read to the children, go for a walk, pick up or sort the mail) Most importantly, **KEEP MOVING AND DO NOT LIE DOWN OR STAY COMPLETELY STILL TOO LONG**. *Remember, she cannot hurt herself through any type of normal activities. We have NO incentive to tell you to do something that would send her back to the operating room! By moving, she will feel better faster and reduce her risk of capsular contracture and another operation! She knows of all this. It is important that you know and understand and help her get moving!*
  8. Around 10:00pm, make sure she takes another pain pill with food and the little pink pill- this is Benadryl (25 mg) and will help her sleep. During the night, she'll wake up when she rolls onto her side, but with the Benadryl on board, she'll go right back to sleep.
  9. She can do nearly anything she wants to make herself comfortable. That may mean more showers, or more arm movements such as continued exercises (stretching) with the hands behind the back. A bra is totally optional. Some patients are more comfortable with a bra, and some without a bra.

*Guide for tomorrow morning*

1. Get up, eat breakfast and take an 800mg Ibuprofen. After 30 minutes, get in a nice warm shower. In the warm shower, we want her arms to be able to touch the head (shampoo the hair is an example) and to do at least 5 slow stretches with the hands behind the back to stretch the chest muscles (pectoralis). It is hard to just pop out of bed and get your arms up- use this guide and she should do very well. (One pain pill may be useful here if after 30 minutes the Ibuprofen did not do enough relief)
2. Use the momentum she has built to get out and go do something. Walk around the mall, run errands, grab a nice cup of tea. We don't expect her to stop in the mall and start doing her arm exercises. But we do expect her to close her own car door, put on her own seatbelt, or carry a couple of smaller items. Normal movements are essential to achieve quality long term results.
3. Expect her to run out of energy around mid-day. So plan your day so that she can stop and rest for a while. But after her nap (limited to 2 hours), get her up and moving again.
4. You will find that the more she moves the better she feels. Help her treat this like a pulled muscle. Yes, you feel it, but it only gets better with controlled movement.

*Again, like a pulled muscle, expect her to feel tighter, more swollen, at the end of the day. That is normal and temporary. Expect her to begin to complain of soreness in the ribs and lower back around the end of day one or day two. This is simply fluid (swelling) moving through the tissue. She will urinate it all out and lose the bloated feeling within five to seven days.*

If she complains of soreness in her upper back- she is tensing her shoulders up into unnatural positions to cause this discomfort. Remind her to stretch her shoulders forward and backward-and relax!

### *Medication Schedule*

Feel free to take 1 pain pill with some food after her 2 hour nap. Otherwise, narcotic pain meds can be taken as prescribed on an as needed basis.

We expect her to take 800mg Ibuprofen at breakfast, 800mg Ibuprofen around lunch and 800mg Ibuprofen at bedtime for the FIRST 3 days. If she needs additional relief around dinner-time, she can take 400mg of Ibuprofen.

She can take the Benadryl if she wants to before bedtime for the first 5 days only. It is not mandatory. It will help her sleep

We expect her to take all of the Ibuprofen we have outlined here. She may choose to reduce the number per day but we'd like for her to take them all.

*Please call the office sometime during your day and let us know how she is doing at*

1-949-706-9988.

### The ONLY DON'T!

The only limitation we request is that for three weeks she not do strenuous aerobic type exercises that elevates the pulse and blood pressure and can cause internal bleeding. Sex is fine, but should be at a reasonable energy level, comfortable, and not at such a level to significantly elevate the blood pressure or pulse. When returning to a normal workout or exercise schedule, start slowly, and if comfortable, increase the exercise level every 3 days. If uncomfortable, back off for a couple of days and start again only increasing the level every 3 days. Common sense is paramount—you can't harm or cause problems by all normal activities.

For clarity:

Pain Pill – These are the pills with narcotic included in them. They have more side effects such as nausea and constipation. Take as directed.

We will usually only provide 20 of these tablets

Examples include:

Norco ((Hydrocodone/Acetaminophen – 5/325)

Vicodin (Hydrocodone/Acetaminophen – 5/300)

Tylenol with Codeine (Acetaminophen/Codeine – 300/30)

Ibuprofen (This is like Advil or Motrin) – We can write for you to get 800mg tablets or better if you just buy 200mg tablets over the counter and take the proper amount as outlined above

Plan to have enough – by following the plan above you may end up taking around 48 of the 200mg tablets over the post-operative days – DO NOT take all at once.

Benadryl – Again, we can write for you to get these, but easier to get the over the counter pills. Benadryl 25mg tablets and take as noted above

Plan to have taken up to 5 of these – One each night if needed for sleep up to 5 nights