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POSTOPERATIVE ABDOMINOPLASTY (TUMMY TUCK) INSTRUCTIONS

- On the day of surgery get as comfortable as possible in a reclining position. DO NOT lay flat. You must get up and walk periodically, such as to and from the bathroom, kitchen, etc. This is to help with adequate circulation.
- The pain medication may cause nausea. Eat/drink well to coat your stomach before taking it. If you experience mild itching, you may take Benadryl as directed. However, if you begin noticing a rash, call the office ASAP or go to the emergency room because you may be having an allergic reaction to the medication.
- You **MAY OR MAY NOT** have drain tubes. If you do, keep record of the output of the drains. If you did not receive a drain record, simply write the output on a piece of paper, noting the time of day and how many cc's. The drains can be removed when the output is less than 25cc in a 24hr period. It is usually at 5-7 days.
- You must wear the garment continuously except when showering. DO NOT shower until the drains have been removed if drains were placed. You may sponge bathe until then.
 - If you **DO NOT HAVE DRAINS**, you may shower at 72 hours. DO NOT submerge the incisions for 2 weeks after surgery or until the steri strips are removed. No swimming, hot tubs/jacuzzi.
- It is recommended you wear a compression garment for a minimum of 4 weeks, or until otherwise advised. You may need more than one garment because good compression is best for the optimal results.
- It is common to have some minor bleeding, bruising, or numbness in certain areas. This is normal and will subside over time.
- Avoid physical exertion activities that cause sweating, an increased heart rate, lifting over 10 pounds, etc. for the first two weeks. You may slowly begin physical activities that do not cause pain after two weeks.
- We will follow up with you the day after surgery, but you can call the office phone number after hours with questions or concerns. If you need immediate medical attention, call 911 or proceed to the nearest emergency room.

I hereby acknowledge receipt of post procedure instructions.	I have read them and understand them.
Signature:	Date: