



LOWER BLEPHAROPLASTY POST-OP INSTRUCTIONS

- Wear Lid Lift Goggles for the first 4 hrs after surgery and 80% of day, for 2 days (remove goggles to see- ex: walk to bathroom or kitchen to eat) use oval eye pads on eyes, place on goggles.
- Apply Vaseline ointment to eyelid suture lines with a Q-tip 3 times a day, starting morning after surgery.
- Tobradex Rx eye drops 4 times a day to eyes, for 7 to 10 days.
- Begin Natural Tears® eye drops as needed for dryness
- On day 3, place 4x4 gauze pads soaked in cool Sterile Saline over the eyes. Place frozen peas or cool compress on top of this (for 10 min on/off, a couple times per day).
- Sleep elevated on 3-4 pillows recliner chair for the first week to decrease swelling.
- No driving for 3 days/ No lifting or exercise for 2 weeks minimum / No contacts for 2 weeks.

EXPECTATIONS

- Rust colored or bloody tears are normal for the first week.
- Temporary bruising and swelling will occur during the first week.
- Bumps of swelling on the suture/incision line, is normal for weeks to months.
- You may experience blurred vision and tearing for approximately 2 weeks.
- Blinking may be difficult or sluggish for the first week.
- Avoid sun or windburn for six months.
- After surgery, Dr. Gross recommends using one of our Medical Grade skin care eye creams for best maintenance care.
- Women may begin to apply make-up around the tenth day after surgery (check w/ Dr. Gross for his approval 1st).

MEDICATIONS

- Doxycycline 100mg 1 tablet two times a day for 3 days/antibiotic.
- Lortab 7.5mg (Hydrocodone) 1 tablet every 6 hours as needed/pain.
- Medrol Dose Pack- take as directed/swelling and inflammation.
- Ativan 1mg (Lorazepam) 1 tablet every 8 hours as needed/anxiety and sleep.
- Tobradex Rx eye drops 4 times a day to eyes for 7 to 10 days.
- Arnica take as directed (begin day before surgery)/swelling and bruising.
- Phenergan (promethazine) 1 tablet every 6 hours as needed/nausea

Follow up Appointment: _____

Primerera call or Text 407.333.3040, if you have questions or concerns. If you have an emergency, call 911.

I have received a copy of the above instructions and agree to follow them

X _____ Date: _____ Time: _____