

## PERIOPERATIVE GUIDELINES - EAR SURGERY

## PREOPERATIVE INFORMATION

Please read this document in its entirety within 1-2 days of receipt as the enclosed can and will greatly impact your surgical experience, recovery, and results.

## PREOPERATIVE APPOINTMENT

During the preoperative appointment several important issues will be reviewed and finalized in preparation for your actual surgery. This includes an open discussion with Dr. Hilinski where you will have an opportunity to have your remaining questions answered.

We prefer to have you come into the office to see Dr. Hilinski in person for this visit. However, we understand that many of our patients live out of state and out of the country, therefore, a virtual preoperative appointment may be more feasible.

## PREOPERATIVE MEDICAL CLEARANCE

If you have any active medical issues that put you at higher risk of undergoing surgery, Dr. Hilinski will require you to be seen by your primary medical doctor and/or a specialist to get 'medical clearance' to proceed with surgery. Medical clearance is, in essence, your other doctors confirming that your overall health is sufficiently stable to undergo surgery under general anesthesia. For example, if you have a history of heart and/or lung problems, you will need to make sure your specialist clears you to undergo the surgery recommended by Dr. Hilinski. The onus for arranging and obtaining medical clearance is the responsibility of the patient – not our office. As such, make sure you have satisfied this requirement prior to your preoperative appointment with Dr. Hilinski. In many cases, medical clearance will be predicated on you getting certain blood tests and/or other studies, such as an EKG or chest x-ray. Since these often need to be scheduled in advance, make sure you give yourself plenty of time to get them done. Failure to get medical clearance in sufficient time may force us to cancel your surgery. So, plan accordingly.

## **ESTABLISHING REALISTIC EXPECTATIONS**

Before you make the final decision to have surgery, it is imperative that you establish realistic expectations regarding the surgical outcome.

The realistic goal of cosmetic surgery is aesthetic improvement in appearance. Toward this end, Dr. Hilinski will always strive to attain the best possible cosmetic outcome for you.

But it is vital for you to know and accept the fact that perfect results will never be achieved. There is no such thing as a flawless result. You will always have imperfections, asymmetries (differences between the right to left), unevenness and irregularities even after meticulous, well-performed plastic surgery.

The bottom line is there is no warranty when it comes to plastic surgery results. In other words, there is no money back guarantee if you are not happy or satisfied with your aesthetic appearance.

If additional surgery is requested to achieve a desired change and/or result, there may be additional surgeon fees, operating room charges and/or anesthesia fees that apply.



## **OTHER RISKS**

## General

As with nearly all other surgical procedures, there are risks of infection, bleeding, bruising, tissue discoloration, over correction, under correction, functional problems, nerve issues, damage to adjacent structures, and the possibility that future and revision procedures may be needed to achieve improved results.

## **Unforeseen Conditions**

On rare occasion, unforeseen conditions are encountered during a procedure. If this occurs, Dr. Hilinski may need to perform other procedures, which he may deem necessary or desirable to correct any unforeseen condition encountered during surgery.

## Allergic Reactions

Occasionally, allergic or sensitivity reactions may occur from soaps, ointments, tape and/or sutures used during or after surgery. Such problems are unusual and are mild and easily treated in most instances. In extremely rare circumstances, allergic reactions can be severe and require aggressive treatment or even hospitalization.

If you cannot accept all the aforementioned, please do NOT proceed with having surgery.

# **AMBULATORY SURGERY CENTER LOCATION**

Dr. Hilinski performs surgeries at his own fully accredited ambulatory surgery center, which is located at the same address as his office. The facility, The Hilinski Ambulatory Surgery Center, is owned and operated by Dr. Hilinski. Record keeping for the Hilinski Ambulatory Surgery Center are separate from those related to Dr. Hilinski's surgical practice. As a result, be prepared to fill out additional forms and sign different documents on the day of your surgery. These are records required by the surgery center.

## **FINANCING YOUR SURGERY**

If you are financing your surgery, please do not reserve a date unless you are certain because when you do so, the entire surgical fee will be processed through your financing company. If you later decide to cancel your surgery (even with more than a 2-week notice), we will attempt to refund/reverse the transaction; however, there may be transaction fees, which cannot be refunded to you. If you cancel within 2 weeks (14 days) of your surgery date, our cancellation policy and penalties will apply.

## **CANCELLATION POLICY**

When you ask our office to schedule surgery for you, we must do several things (long before the day of your surgery), including, but not limited to:

- Reserve the operating room.
- Secure the necessary professional staff (nurses and surgical technicians) who will be needed.
- Arrange for anesthesia coverage for your procedure. The anesthesiologist is effectively giving up other work to be available for your surgery.
- Order and pay for any surgical supplies and/or implants needed for your surgery.
- Prepare the required equipment and sterilize the necessary instruments.



- We must turn down every other patient who may also want surgery on the day and time we have personally reserved for you.
- We also pay the office staff to ensure all the above is done for you, which can take a
  significant effort in many cases. At times, the office staff goes to great measures to
  accommodate patients and their desired surgical dates, under the expectation that patients
  will uphold their requests.

Because of these financial and time commitments we must take, we ask that you be definite about your desire for surgery and be certain that you have the funds available before asking us to get on our schedule.

The closer to your surgical date that you cancel, the higher the fee will be. Keep in mind these times below are NOT working days – they are calendar days.

Cancellation within 2 weeks: you will lose your 20% deposit.

Cancellation within 1 week: you will lose your 20% deposit plus \$2000.

Cancellation within 48 hours: you will lose 50% of the total charges of the procedure.

If you are rescheduling, you will be required to pay a new 20% deposit. Your initial deposit does not apply to rescheduled surgery dates. If you fail to follow our instructions in preparation for surgery and this is discovered on or near the scheduled date, Dr. Hilinski reserves the right to cancel your procedure and the above cancellation penalties will apply, including the additional rebooking deposit for a future date. Examples of this are patients who are told to stop smoking yet continue to do so and arrive at the center with obvious scents of smoke. If you take any blood thinning medications and/or supplements within 2 weeks of surgery – which will contribute to significant surgical and postoperative complications, this will prevent Dr. Hilinski from performing your procedure in a safe manner. In this situation, your surgery will be cancelled, and the above penalties will apply.

## **RESCHEDULING YOUR SURGERY**

If you request us to change your surgery date, it creates an immense amount of work and challenge for our staff. We understand there are circumstances that do arise that are out of your control. However, such issues still leave our office with a logistical predicament that needs to be addressed. Please be respectful of the fact that we cannot guarantee a certain time frame in terms of rescheduling your surgery. Dr. Hilinski tends to have a long surgical wait time and you may find yourself waiting a significant period before getting back on our schedule. We will do our best to accommodate your new requested time, but, again, there is no guarantee this will be in a timely manner.

# **LEADING UP TO SURGERY**

## **Prescriptions**

Dr. Hilinski will send in your pain medication prescription around the time of your preoperative appointment, which is usually 10-14 days in advance. In addition, he may send in other prescriptions that may be needed for your procedure. YOU MUST PICK UP THESE PRESCRIPTIONS WELL BEFORE YOUR SURGICAL DATE. DO NOT WAIT UNTIL THE DAY OF SURGERY TO GET THEM AS YOUR PHARMACY MIGHT BE OUT OF STOCK AND YOU WILL HAVE TROUBLE GETTING THE PRESCRIPTION FILLED. FOR OUT OF STATE PATIENTS, THERE MAY BE ISSUES WITH INTERSTATE PRESCRIBING RULES THAT



INHIBIT THE PRESCRIPTION FROM BEING SUCCESSFULLY TRANSMITTED. SINCE A CHANGE WILL REQUIRE A NEW ELECTRONIC TRANSACTION EACH TIME A PRESCRIPTION IS GENERATED, THIS WILL FURTHER DELAY PICK UP.

# **Smoking**

You must refrain from smoking for at least four (4) weeks prior to surgery and two (2) weeks after surgery. You should also avoid being in the same room with people who smoke for the same period. Failure to do so will contribute to a significant risk of surgical complications, including very poor wound healing.

#### Alcohol

You must refrain from drinking alcohol within two (2) weeks of surgery.

## Sun Exposure

You should avoid sun exposure to your surgical site within the two (2) weeks prior to surgery.

#### Arnica

Start taking Arnica five (5) days prior to surgery. Arnica is a supplement that Dr. Hilinski recommends for his patients to help reduce the incidence of postoperative bruising. Arnica will typically be provided to you at your preoperative appointment. If you are not having an in-person preoperative appointment, you can purchase a supply of Arnica at your local pharmacy.

# THE NIGHT BEFORE AND DAY OF SURGERY Topical Skin Products

Please remove all make-up, face creams, and moisturizers the night before your surgery and do not apply any of these on the day of surgery.

#### **Nail Polish**

Nail polish must be removed to allow for proper monitoring of your oxygen levels if you are undergoing intravenous or general anesthesia. Acrylic nails must be removed from at least 2 fingers (1 on each hand) to allow for proper oxygen monitoring.

# **Piercings**

You should remove all piercings from your body – including those outside of the head and neck region. If you fail to do so and we need to remove a piercing on your behalf, we will not take responsibility for damaging the hardware in the process of doing so.

## **Eating and Drinking**

If your procedure is being performed with local anesthesia only, which is the case with a majority of our cosmetic ear patients, you can have a light meal before your procedure, such as toast and orange juice or coffee. If you are uncertain regarding what type of anesthesia you will have, please call the office to clarify.

You must avoid eating and drinking (including water) after midnight the night before your scheduled surgery date if you are undergoing intravenous sedation or general anesthesia. Failure to do so can put you at risk of significant complications when being put under anesthesia.



# Clothing

In preparation for the morning of your surgery, please have some comfortable, loose-fitting clothing. We prefer you come dressed in a button-down shirt as this minimizes concerns of you pulling a shirt over the face and neck region once bandages have been placed.

#### Hair

If you have longer hair, we ask that you place it in a high ponytail on the top of your head using a hair tie.

## **Valuables**

Please do not bring any unnecessary valuables with you on the day of surgery as we cannot be held responsible for their loss and/or damage.

# **Transportation**

You must arrange for proper and timely transportation to and from the surgery center. Typically, you will need to arrive one (1) hour prior to your scheduled surgery time but confirm this time with our staff if you are uncertain. If you are having intravenous sedation or general anesthesia, your ride home must be with a responsible adult that you know. You CANNOT take a cab, Uber, Lyft, or equivalent after having intravenous sedation or general anesthesia.

## **Assistance After Surgery**

If you are having intravenous sedation or general anesthesia, be prepared to have a responsible adult remain with you for at least the first 24 hours after surgery to assist with your needs. Our staff will ask you for their name and contact information upon arrival to the facility. If you don't have a trusted individual to stay with you, we can assist with hiring a professional caretaker – but this must be arranged in advance, and this will be at your own expense.

#### **GENERAL POSTOP GUIDELINES**

## POSTOPERATIVE MEDICATIONS

## **Pain Medications**

Dr. Hilinski will typically provide you with a prescription pain medication to be taken after surgery. Make sure you provide our office with accurate pharmacy information so that we can send this prescription well in advance of your surgical date. **You should have the pain medication in hand before the day of surgery.** If you wait until the day before surgery or the day of surgery to get your prescription filled, the pharmacy may not have it (which is not uncommon) – forcing you to run around looking to get it filled elsewhere (while you are in pain from the surgery. If this occurs, we cannot help you out with alternatives. So make sure you pick up the prescriptions well in advance.

Common narcotic prescriptions include Norco (Vicodin), Percocet and Tramadol. If you have any allergies or adverse reactions to any medications, please inform our office staff. Begin taking the pain medication as directed once you get settled after the surgery. Of note, it may take several doses of the pain medication (over 4-8 hours) before your blood levels get up to the point where you feel the full effects. In a great majority of cases, patients will use the prescription narcotics for the first 2-3 days of recovery. Thereafter, you can try to switch to using just over-the-counter Tylenol for pain relief. **Please remember that you still cannot use any of restricted medications during the first week of recovery**. The amount of narcotic medication



prescribed to you should be ample in 99.9% of cases – meaning Dr. Hilinski will likely NOT provide you with a refill of the narcotic.

# Benadryl

You may take some Benadryl during the first 1-2 days after surgery to help reduce your pain medication requirement since Benadryl can act as a sedative in this manner. Benadryl is over the counter and may be purchased at your local pharmacy. Take 1-2 tablets of these every eight (8) hours as needed.

## **Oral Antibiotics**

Dr. Hilinski does not routinely prescribe oral antibiotics for surgery. If he does so for your particular case, these are to be started on the evening of your surgery and taken as directed until gone.

#### Arnica

Continue taking Arnica for upwards of one (1) week after surgery.

#### POST-OPERATIVE APPOINTMENT

In most cases, you will be scheduled to visit with Dr. Hilinski 2-4 days out from surgery for your first post-operative appointment. In some cases it may be sooner while in others it may be later. Please clarify this appointment with our staff.

## **SUPPLIES**

There are several over-the-counter supplies you may want to obtain prior to your surgical date for general wound. Some of these can be purchased at your local pharmacy and some of them will be supplied by our office at your preoperative appointment. This includes:

- Quality-tips more commonly known as Q-tips
- A mild anti-bacterial soap (such as Dial)
- Baby shampoo
- A tube of over-the-counter Bacitracin ointment (do NOT use Neomycin-containing ointments)
- As an alternative to Bacitracin, you can get Aquaphor ointment

## OTOPLASTY AND MACROTIA DRESSING

If you had otoplasty or macrotia ear reduction surgery there will be a bulky dressing over the ears that wraps around the head. This dressing may feel a bit tight as it is intended to put pressure on the ears. Leave this dressing intact and make sure to keep it clean and dry until Dr. Hilinski removes it in the office. It is not unusual to experience a little bleeding under and around the bandage during the first 1-2 days.

For patients have earlobe reshaping alone, there will typically be no dressing.

# **OTOPLASTY INCISION CLEANING**

Once your dressing has been removed by Dr. Hilinski, you will begin cleaning the incisions.

Cleaning the surgical site is critical to achieving an ideal result. If you fail to do this properly, it is your own fault. The following steps should be performed 2 times per day up until 10 days out from surgery.



- First dip a Q-tip into the anti-bacterial soap solution.
- Use the saturated Q-tip to gently clean the incision behind the ear to remove any debris, including dried blood that may have accumulated around the sutures (stitches). Do NOT attempt to pull the ear forward in the process of cleaning it. It is best to have someone do this for you. The end goal is to see the sutures in the skin without surrounding debris. But do not rub or scrub the incision line in the process of cleaning it with the Q-tip. Use a gentle rolling motion as you clean.
- Dry the area with a new, clean Q-tip. This is an important step that needs to be done thoroughly before the next step.
- Apply a thin layer of Bacitracin ointment to the incision line using a Q-tip and the same rolling motion.

Repeat the steps above in 12 hours.

## MACROTIA AND EARLOBE INCISION CLEANING

Once your dressing has been removed by Dr. Hilinski, you will begin cleaning the incisions. For earlobe reshaping patients, this cleaning process should begin on the evening of your surgery since there is no dressing placed.

Cleaning the surgical site is critical to achieving an ideal result. If you fail to do this properly, it is your own fault. The following steps should be performed 2 times per day up until 10 days out from surgery.

- First dip a Q-tip into the anti-bacterial soap solution.
- Use the saturated Q-tip to gently clean the incision line to remove any debris, including dried blood that may have accumulated around the sutures (stitches). Do NOT attempt to pull the ear forward in the process of cleaning the back side. It is best to have someone do this for you. The end goal is to see the sutures in the skin without surrounding debris. But do not rub or scrub the incision line in the process of cleaning it with the Q-tip. Use a gentle rolling motion as you clean.
- Dry the area with a new, clean Q-tip. This is an important step that needs to be done thoroughly before the next step.
- Apply a thin layer of Bacitracin ointment to the incision line using a Q-tip and the same rolling motion.

Repeat the steps above in 12 hours.

# OTHER POSTOPERATIVE CONSIDERATIONS Showering

If you had only earlobe reshaping, you should keep the ears dry for 72 hours before showering and getting them wet.

If you had otoplasty and/or macrotia ear reduction surgery, you need to be very careful that you do not get any of your bandages wet while they are in place. Once the bandages come off, you can get the ears wet. But you will likely see some residue and discoloration from surgical markings and skin prep solution. The goal is not to remove these by scrubbing them off during that first shower. Rather, you should allow the soap and lather to drizzle onto the ears, so the



skin gets passively cleaned over the first few days of showering. You can very lightly sweep over the surface of the skin with the pads of your finger and soapy water. But do not rub and do not move the ears in the process.

# Sleeping

Starting on the day of surgery, you should sleep with the head elevated 15-20 degrees to help reduce swelling. In essence, you should sleep with your head above your heart level. You do not have to sleep bolt upright. Most patients will simply use several pillows to keep their head, neck and chest propped up at the proper angle. You must also take precautions to avoid rolling over on the surgical site while sleeping. This is critically important during the time you have your bandages in place, but you should continue this practice of not rolling over for upwards of 4-6 weeks after surgery. To help toward this end, many patients will use a travel pillow to help prevent them from rolling over on their face.

# Ear Bandage

Once the surgical bandages come off, Dr. Hilinski will recommend you wear a lighter type of ear bandage.

If you had otoplasty performed, you should wear the ear bandage for upwards of eight (8) weeks after surgery. You don't have to wear the bandage 24 hours a day. But you should wear it when out of the public eye and at the very least while sleeping through the night.

If you had macrotia ear reduction performed, you should wear the ear bandage only when sleeping. For macrotia patients, the bandage is worn to prevent you from accidentally clipping or inadvertently moving the ear while sleeping during the first eight (8) weeks of healing.

Some patients may experience chafing from the ear bandage that may result in skin irritation over the surface of the ear. If this occurs, you should apply some bacitracin or Aquaphor ointment to the sites or irritation. Plus, you should place a non-adherent dressing (which can be purchased at your local pharmacy) over the ear to prevent further chafing with bandage use.

#### Diet

Start with a liquid or soft diet during the first 1-3 days after surgery. High protein content is advised to help optimize the healing process. After 3 days, you can transition back to your normal diet, although you should continue to avoid salty foods for 4-6 weeks after surgery.

#### **Fever**

It is not unusual for patients to feel like they have a slight elevation in temperature (99-100°) during the first few days of recovery. In some cases, inadequate expansion of your lungs may be a contributing factor. Deep breathing 10 x per hour may help.

# **Cold Compresses**

During not attempt to use any cold compresses after cosmetic ear surgery.

## **Brushing Your Teeth**

No real restrictions after cosmetic ear surgery.

#### Masks



We only recommend use of a mask that does not put pressure on the surgical area as this may cause unwanted damage. For example, it is advisable to only use the type of mask that has a tie mechanism over the head as the looped mask will cause unwanted friction behind the ear.

#### **Haircuts**

You have to be very careful about getting your hair cut and/or styled for upwards of 10-12 weeks after surgery. In particular, your stylist must avoid pulling the ear forward or manipulating it in any manner as this can cause unwanted damage to the ear.

## **Eyeglasses or Sunglasses**

Otoplasty patients should be prepared to avoid wearing eyeglasses and sunglasses for upwards of eight (8) weeks after surgery. You may also switch to contact lenses for this period.

Macrotia patients can resume use of glasses once the bandages have been removed so long as they are not rubbing against the surgical site.

#### Ear Buds

We recommend you avoid using ear buds or equivalent devices for upwards of 4-5 weeks after otoplasty surgery. If you only had macrotia ear reduction surgery, you can likely begin wearing these comfortably after 2-3 weeks.

## **Skin Care**

You can resume your normal skin care regimen as long as you are avoiding any contact with the ears for the first eight (8) weeks of healing.

## **Makeup After Surgery**

You can begin using makeup the day after surgery.

#### Scar Aids

In most cases, Dr. Hilinski recommends a topical wound aid be used once the sutures have been removed and/or have dissolved away. Usually this is around day 6-7 after surgery. These are products that help to optimize wound healing and improve the appearance of scars. We highly recommend Stratamed or Strataderm. Alternatively, you can get topical silicone gels at your local pharmacy. These products are used as directed on the packaging for upwards of 4-6 months after surgery.

## **Sun Precautions**

You should avoid direct sun exposure on the ears for upwards of twelve (12) months after surgery. Doing so will help minimize chances of abnormal skin pigmentation. It is best to use a sun block that contains aluminum oxide or zinc oxide crystals to help reflect sun if you are out and about. A wide brimmed hat is also helpful in shading the ears when outdoors.

# **Exercise**

You should avoid vigorous exercise and strenuous activity for the first ten (10) days of recovery. This includes avoidance of body positions where your head is left hanging down. Very light exercise in the form of a casual walk is permissible once the bandages are removed. But make sure your heart rate and blood pressure are not elevated until 10 days postoperatively. Even then, you may experience a throbbing sensation in the ears, which is not unusual.



## **Avoiding Mechanical Trauma**

During the first 4-6 months of the healing process, it is vital that you avoid any mechanical trauma to the ears if you had otoplasty or macrotia ear reduction. This includes, but is not limited to, activities involving wearing a helmet and/or mechanical friction to the ear.

#### **Dental Visits**

There are no restrictions regarding dental visits other than precautions with pressure on the ears.

## **Swimming and Diving**

In general, you should avoid swimming for one (1) month after surgery. Once resumed you should avoid use of goggles and masks for upwards of six (6) months after surgery.

## **TIMELINE FOR RECOVERY**

Keep in mind that the timeline for recovery from cosmetic ear surgery is upwards of one (1) year. Although many patients feel like they appear socially acceptable in 10-14 days after surgery, there is still quite a bit of biologically healing that needs to take place. It is important that you take this into consideration as you allow your body to go through all the phases of surgical healing.

## **QUESTIONS AND CONCERNS**

If you have any questions or concerns regarding the information contained here, please do not hesitate in contacting our office.