TR FACIAL PLASTIC SURGERY

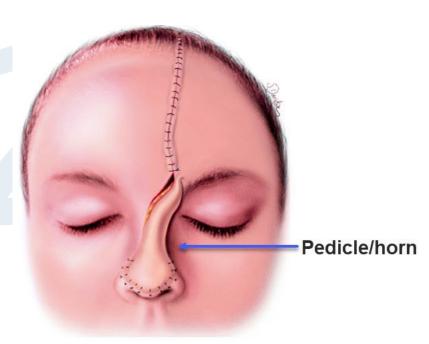
FOREHEAD FLAP INSTRUCTIONS

What happens during surgery:

A **forehead flap** is a surgical technique used to reconstruct large or complex defects on the nose. Skin, fat, veins, and arteries are taken from the forehead to replace missing nasal skin. This requires **at least two** surgeries, although in certain situations it may require **three or more** surgeries. Surgeries are spaced 3-4 weeks apart to allow your body to re-establish blood supply to the part of the flap that will be attached to your nose after the second surgery.

What is a pedicle?

The pedicle is the forehead skin that is cut and rotated down to cover the hole in the nose. It contains a major artery which keeps the skin alive. Under the pedicle, you will have a raw side which is left open and is covered gently wrapped with a yellow dressing. This exposed raw tissue will commonly turn yellow. This worries some people as it may look infected. True infection in forehead flaps is VERY rare (<3%). In such cases, the skin turns red, painful and drains foul-smelling pus. Over the three weeks, the pedicle can "shrink" and sometimes feels tight. The pedicle will make it difficult for you to wear your glasses, so you may need to suspend them with a device.



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Wound Care:

Day 1, 2 and 3 after surgery:

• Clean the suture lines with a 50/50 mix of hydrogen peroxide and water on Q-tips® using a rolling motion to remove crusts. Ideally, do this three times a day. Then apply a thin layer of Aquaphor to the vertical forehead incision and to the nasal sutures. Do NOT use antibiotic ointments since these may cause skin irritation.

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- Keep the incisions open to air while you are home but make sure they are coated in Aquaphor. If you leave the house, you can cover the wounds with a non-adherent gauze pad secured with paper tape. Before bed, you can apply a dressing as well.
- Use ice packs on the eyes and forehead to decrease swelling. You can put ice packs on either side of the nose; but **do not place directly on the flap.**
- Sleep in a recliner or with your head elevated on two pillows.

Day 4, 5 and 6 after surgery:

• Gently clean the area with mild soap such as Dove® or Cetaphil® three times per day. Then apply Aquaphor.

Recovery:

Activity:

- Depending upon how complex your defect is, surgery can be long -- Get lots of rest.
- You can resume light activities 24 hours after surgery.
- Keeping your head elevated for the first 2 nights after surgery (propped up on 2-3 pillows or by sleeping in a recliner).

Glasses:

Use tape to suspend them from your forehead. Do NOT rest them on the flap.

Diet:

- Decreased activity may cause constipation, so add additional raw fruit to your diet.
- Drink plenty of fluids. You should be urinating every 6 8 hours at least.

Medication:

- If you need to, take pain medication as prescribed.
- Do not drink alcohol when taking pain medications.
- Alcohol can worsen fluid buildup in the body, so try to avoid it for 3 weeks after surgery.
- If you are taking vitamins with iron, resume these supplements as tolerated.
- Do not smoke. Smoking delays healing and increases the risk of complications.

What is it supposed to look like?

• You can expect bruising and swelling to peak 48 – 72 hours after surgery, and it will gradually decrease over a week or so.

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- Drainage and mild bleeding from the flap during the first days after surgery is common.
- If you have fresh, red blood that soaks a gauze more often than one pad every 10 minutes, contact the clinic.
- Forehead tightness and headaches are common for the first couple weeks after the procedure.
- Tingling, numbness, discoloration and itching in some areas and light redness around the incisions are normal side effects and will resolve with full healing.
- More often than not, additional minor "touch-up" procedures may be necessary to improve your final outcome. These could include steroid injections, "dermabrasion" to smoothen skin edges or contouring procedures.

Healing Timeline:

- Day 1: Stage 1: Forehead flap Surgery
- Day 7: Suture removal, Staple removal/Wound check
- Day 21: Stage 2: Flap division and Inset
- Day 28: Suture removal
- Six weeks post-op: Steroid injections +/- Dermabrasion if needed
- 4 months post-op: Flap debulking if needed

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