



John M. Hilinski, M.D.
San Diego Face and Neck Specialties
 4111 Randolph Street, San Diego, CA 92103
 (619) 296-3223

DISCHARGE INSTRUCTIONS

During the first 24-48 hours following surgery, we recommend that a friend or family member remain with you to assist with your needs.

DIET

- Begin with clear liquids, juice and light foods such as Jello, soup, toast, etc. If no nausea, you may progress to a regular diet.
- Avoid greasy, spicy, heavy foods.
- No alcoholic beverages.

ACTIVITY

- You are advised to go directly home and stay in bed the first night.
- Restrict your activities for 24 hours resuming activity per Dr. Hilinski's instructions.
- Do not drive or operate hazardous machinery for 24 hours following surgery and as long as you are on pain medication. When taking pain medication be careful when you walk or climb stairs. Dizziness is not uncommon.

MEDICATIONS

- Prescriptions should have been provided to you already. Follow the instructions carefully.
- Resume your normal prescriptions medications following the surgery with the exception of anything on our Restricted Medication List.
- Make sure to eat and/or drink before taking the medications.

WOUND CARE

- A small amount of blood is to be expected following your surgery. Do not be alarmed. If you note what is thought to be an excessive amount, call Dr. Hilinski.
- Do not change or remove your dressings unless noted specifically by Dr. Hilinski to do so.
- Keep the dressings clean and dry.
- Rhinoplasty and Revision Rhinoplasty patients need to follow the printed guidelines for this particular type of surgery

Contact Dr. Hilinski if any of the following are noted:

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| ✓ Severe pain unrelieved by pain medication | ✓ Persistent dizziness or fainting | ✓ Increased swelling that is unexpected |
| ✓ Excessive bleeding | ✓ Infection of the operative site (redness, increased pain, discharge, foul odor) | ✓ Persistent nausea or vomiting |
| ✓ Temperature elevation over 101.5 | | ✓ Inability to urinate |

If nausea or vomiting occurs, use the suppository supplied to you (usually Phenergan) once every 4-6 hours or as needed.

See Dr. Hilinski for an appointment _____

Report any concerns or problems to 619-296-3223. In case of an emergency, call 911 for immediate assistance.

I have received, read and understand the above instructions. All of my questions have been answered to my satisfaction.

 Signature of Patient, Parent or Guardian Date Signature of Patient, Parent or Guardian Date

Phone number at which we can reach you the night of surgery: _____