



OP. DR. AHMET CAYMAZ

KBB HASTALIKLARI, BAŞ & BOYUN CERRAHİSİ

After Rhinoplasty Procedure Information Form

In the first two days after the operation, the nose circumference is frequently applied for 10 minutes. Cold application will be helpful.

After returning home, this process can be continued with ice gels. Bleeding is normal in the first three days after surgery.

If deemed necessary after the surgery, a diuretic may be prescribed to reduce your edema. After the surgery, there is no harm in taking a warm shower (2-3 minutes) without wetting the nose.

From the second day of the surgery, you can eat normally, excluding salty foods and alcohol that require very hard chewing.

You can brush your teeth with a soft brush.

Whether there is a tampon or not, the inside of the nose should be washed with plenty of sea water and immediately after that, the clots should be softened by applying cream to the nostrils. (every hour while awake)

For the first three weeks, blowing your nose should be avoided, and the inside of the nose should be cleaned with sea water.

Postoperatively, you should lie in the head-up position until the bandages are completely removed.

Take care not to sleep face down, if possible on your side (travel pillows can be used.) You can use padded pillows produced for patients who have had nasal surgery while sleeping at night.

The plastic plaster on the nose is removed at the end of the first week (7th day).

After the first week, taping is done for a week (7 days).

If possible, you can do this banding yourself for 2 months, only on the upper part of the nose tip and at night.

After the second week, do the massages described every hour for three months, lasting 3-4 minutes.

During the first 3 weeks, we recommend that you squeeze the recommended hypertonic saline solution 6 times a day with two bubbles in each nostril, and then apply a thin layer of the recommended softening cream to the nostrils from the inside.

There may be bruising and swelling under your eyes that will disappear in a week, it is recommended not to be exposed to the sun with bruises.

You can apply the recommended detention creams to the bruises (do not get into your eyes)

Supplementary medicine containing "Bromelain", which you will drink 2 times a day on a full stomach for 1 month after the surgery, will help you get rid of edema and heal faster.

If you have had surgery during the summer, the surgical area should be protected with factor 50 sunscreens that are renewed every hour as long as you are exposed to the sun; You can wear a hat.

Glasses should not be worn (including sunglasses) for the first 3 months, unless otherwise stated, you can use contact lenses.

Do not enter the pool for the first 3 weeks. Although sea water is good for crusting, swimming may occur at different times for each patient.

It is normal to feel like flu for 3 weeks after the surgery and runny nose.

We recommend that you avoid sexual activity for 3 weeks after surgery.



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From the 3rd week after the surgery, you can start sports such as pilates and yoga, heavy functional training and long jogs from the 3rd month.

Postoperative swelling on the nose goes down at the end of the 3rd month and returns to the normal position in about 6 months. In thick skins, this period can be extended up to 1 year.

Swelling does not disappear from everywhere at the same time, this can create a feeling of asymmetry in your nose, your nose may appear crooked one morning when it is straight, do not worry.

Up to 3 months of numbness at the tip of the nose is normal up to 6 months of stiffness. Foods such as parsley, pineapple and green tea can help relieve edema.

If possible, we have check-ups in the 1st week, 2nd week, 1st month, 3rd month, 6th month, 1st year and once a year after the surgery. (you can send photos or videos if you are out of town or out of the country)

1st week, 2nd week, 1st month check-ups at the hospital are free of charge. In the next controls, the inspection fee must be paid by making an appointment.

USE OF NOSE HOLE SUPPORT APPARATUS

After the tampons are taken (usually after the 7th day), they are started to be used. It is recommended to wear it day and night for the first two weeks. It is removed occasionally and intranasal cleaning and dressing is done.

After two weeks, it should be burned at night for three months and removed in the morning.

When placed in the nose, it should be cleaned with soap, rinsed and applied with a light cream.

Every 2-3 days, 1 teaspoon of bleach should be added to 1 glass of water and left for 1 hour.

Diagnosis _____

Treatment/procedure to be applied _____

Side/grade if applicable Right sided Left sided Both sided Grade _____

Should you not intend to be informed about the purpose, duration, advantages, success ratio, potential risks and complications and alternative options of the treatment to be applied and as well as about the subsequent potential risks in case you do not accept the treatment, please declare so below with your hand writing.

I hereby declare that;

My attending physician informed me about my disease, the treatment option to be applied, its duration, advantages, success ratio, the fact that it does not necessarily guarantee the recovery of current status, period of healing, potential risks and complications, alternative techniques, the potential situations I will experience on the condition that I reject the treatment and compulsory performance of an additional operation/intervention/procedure if deemed necessary and s/he answered all my questions regarding these matters.

Above mentioned procedure has been disclosed to be performed on myself/patient I legally represent by the physicians, nurses as well as other healthcare professionals under the authority, surveillance and control of my attending physician.

I have been informed that if required, anesthesia will be performed by an anesthetist, sedation will be performed by an anesthetist or another physician competent in sedation and local anesthesia will be performed by my attending physician.

While being entitled to make decision and think straightly, I accept the medical procedure to be performed, and consent that my attending physician and his/her team will carry out any medical treatment option/surgical technique/intervention they deem to be necessary.

I authorize the hospital to examine, inspect, dispose of or keep the tissues or organs removed during the procedure for which I have consented above.

I allow my medical reports to be used for scientific researches provided that my identifying information is kept hidden.

Patient's			
Full Name:	Signature:	Date:	Time:
Date of Birth:			
Legal Representative's			
Full Name:	Signature:	Date:	Time:
Degree of Relationship:			
Reason why the consent is delivered by legal representative of the patient:			
<input type="checkbox"/> Patient is not conscious	<input type="checkbox"/> Patient is under 18		
<input type="checkbox"/> Patient is not entitled to make decision	<input type="checkbox"/> Emergency		
Witness'			
Full Name:	Signature:	Date:	Time:
Informing Physician's			
Full Name:	Signature:	Date:	Time:
Interpreter's (If required)			
Full Name:	Signature:	Date:	Time:

Informed consent is delivered by the patient himself/herself if s/he is older than 18 years old, by the patient himself/herself together with his/her legal representative if the patient is aged between 15 and 18 and by the representative of the patient if the patient is under 15 years old and/or is unconscious and/or is not entitled to make decision and in case of emergency.