

CSL

THERAPY

CSL THERAPY CLIENT
POST-PLASTIC SURGERY
CARE INSTRUCTIONS

CSL THERAPY CLIENT POST-PLASTIC SURGERY CARE INSTRUCTIONS

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GENERAL INFORMATION | FIRST 24 HOURS DIRECTIVES

Follow as applicable to your procedure type.

Don't shower the first 24 hours. If you would like to freshen up, you can take a sponge bath.	If you have a drain, write down & track the expelled volume every time you empty the reservoir.	No direct pressure is to be placed on fat grafted areas until week 3. Be careful not to slam/slap your new curves into any counters, corners, or hard surfaces.
Relax. Don't overthink this. Small things that seem extreme are normal presentations after trauma that your body will respond to.	Be sure to have an emotional support system in place through friends, family, and surgery colleagues.	Avoid long exposures in direct sunlight.
Eat standing, sitting backwards on an armless chair with a pillow supporting your chest, or kneeling. Compression tends to raise food reflux; antacids help to offset this.	Take all medications as prescribed on time. Don't double up on medication due to pain. Breathe through it slowly as this part of the trauma is normal and will pass.	Take your resting temperature throughout the day. Contact your physician if you develop a fever above 100 degree F.
Walk slowly every 4 hours for 5min to avoid blood clots. This will also help stimulate your lymphatic system.	Avoid Gatorade. Opt for Powerade, Pedialyte, or Emergen-C.	Fluid, blood, and lymph drainage from incisional sites are normal.
Do diaphragmatic breathing for at least 3-5min three times a day OR use a spirometer 3 times a day for 2min.	Keep movements gentle; if you are restricted from conducting a movement, don't force it.	While we know and share your excitement for your enhanced physique, don't judge your body right away. Note: Swelling and bloating are normal. If you notice you are larger and puffy right after surgery OR you weigh more, be patient with yourself and your body; it will start to go down as time passes.
Avoid bending over to pick up anything or reaching. Instead, use a grabber or ask for help.	If you have to climb stairs, do so one at a time moving slowly.	
Avoid laughing, coughing, or sneezing. If it happens? Hold your stomach down (gently press a pillow against it), reinforcing the external layers.	Journal your healing. Write down when you walked & for how long, when you took your medications last, your last bowel movement, your last massage, the volume of fluid in your drain, what you ate and when. Get in the habit of writing down all of this important information; it will help anyone providing you aide thereafter better assist you.	Headaches, fatigue, drowsiness, forgetfulness, & nausea after plastic surgery are normal. However, if you have a headache that goes away as soon as you lay down, and returns as soon as you stand up [& then goes away again as soon as you lay down] you need to be checked out by a physician immediately.
Sleep elevated with pillows, avoiding direct pressure on fat grafts. You can also use an antigravity chair (with two circles cut out with a strip remaining in the middle), a BBL mattress (be careful, the holes tend to run large), a memory foam mattress with a hole cutout (your bottom shouldn't be touching the ground), or a bean bag pillow/chair. Whichever way you select, sleep "evenly"; don't lean towards one side or the other. Note: these alternatives require assistance in standing back up out of them as you won't have control of core muscles.	Keep your garment on unless you have to have a bowel movement. If you have to remove it for a bowel movement, reassemble your compression garment and accessories in the same manner they were before removing	You may not have an appetite, but food is fuel for your body to start healing. Eat small light meals every 3-4hrs. Don't skip meals. Limit sugar and salt intake. Try to avoid heavily processed foods.

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AT HOME CARE INSTRUCTIONS - PAST THE FIRST 24 HOURS

COMPRESSION

Camisole: fitted, not oversized compressive wickering tanks; change every day or as needed based on perspiration

Foams: insert foams inside of garments by day 3; there should be one on either side and then another placed in-front closing gaps on top of camisole compression tank. Wear 8-12 weeks postOp.

Boards: Wear 8-12 weeks postOp (unless noted otherwise)

Ab Board - make sure it fully covers the width and length of your torso. This goes on top of your front abdominal foam. Note: wrap around foams with ab board insert isn't sufficient. Additionally, ab boards should never be used without foams. Body lift clients should line their incisional-line with poise/maternity pads until fully healed over.

Back Board - use tall lumbar back board with tip pointing down. This goes on top of your camisole. Note: this board may shift around some. If this becomes a problem, velcro tape it in place.

Sideboards - use if and only if the garment is digging into your sides through the foams. Note: this is temporary and shouldn't be used longer than 2 weeks.

Socks: compression socks with an mmHG of 15-20 should be worn 10-14 days postOp + anytime you fly. If you had a fat transfer to your hips or thigh lipo, avoid thigh high compression socks. Opt for full foot compression socks instead of the compression socks with the toes out to avoid toe swelling.

Bra (if applicable): get a broad full high compression bra; avoid racerbacks or thin straps. Wear for 4 weeks postOp. If you have a faja with bra included AND you had breast work done, make sure to still wear a compression bra. The faja bralets do not suffice as adequate mammary compression.

Faja selection & stages:

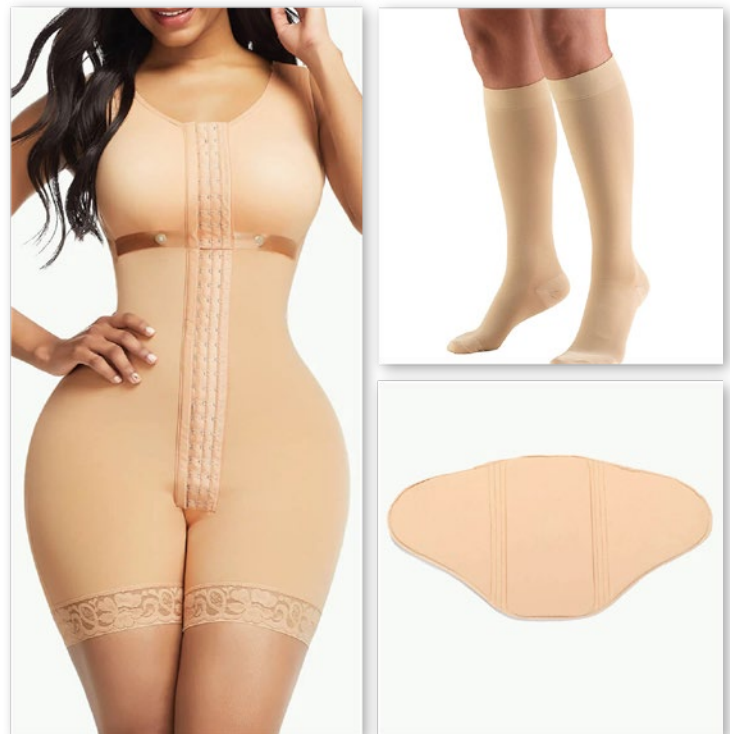
Arms: if you had arm lipo or an arm lift, select either a faja with arms connected or wear an arm faja sling with an upper back connector. Garments need to come to the elbow. Note: sectioned arm sleeves alone are not adequate compressive options for optimal post plastic surgery healing. Wear 8-12 weeks postOp.

Chin, neck, face: wear chin girdle (for chin lipo) or full face faja (for face lifts) for 24hrs for 2 weeks and then thereafter just at night.

Legs: wear a faja that comes past the knee; consider a garment that comes to the ankle. Wear 8-12 weeks postOp.

Body: stay in stage 1 garment or medical binder no longer than 7 days postOp. Then switch to a stage 2 garment by day 8. Use extenders as needed to safely grow into your stage 2 garment. The stage 2 faja is to be worn until 8-12 weeks postOp. As the garment gets too big, do not go down on size; have the waist altered in. Stage 3 fajas are optional past this point but may be worn to enhance results. Note: garments are to be worn 21 hours a day for best results; for hygiene safety, keep 2-4 clean garments in rotation. (Do not shower in your garment)

Poise/maternity, & chux pads (as needed): place on incisional lines, on sides to alleviate pressure and/or discomforts OR to add more compression as faja loosens, and for spot-treating inflamed areas. Note: if you are using more than 4-6 pads for added compression, your faja is too loose and should be altered.



SKINCARE & INTEGRITY

Skin hydration and moisture levels: Skin needs an equal balance of moisture and dryness to heal properly. Moisturize skin daily after showering. Reapply throughout the day as needed if you notice your skin is drying out faster due to added compression.

Effects of gravity: Gravity pulls down on your body unevenly after surgery. This happens every time you are out of your compression garments for more than 3hrs or you aren't maintaining accurate compression levels. Wearing the right garments helps to counteract this gravity pull.



(KT Tape Application)

KT Tape application: KT tape can be used for two purposes: lymphatic circulatory promotion and for skin retraction. The non-tension method can be introduced the day of surgery, while tension based methods shouldn't be introduced until day 3 postOp. The tape strips should be replaced every 2-3 days.

Bruising:

Following a bruising chart, bruises lighten over time. Should yours start to darken or radiate heat this may be a sign of lipo burns and/or cellulitis. If these occurrences present, please contact your physician.

Perspiration: Compression tends to encourage sweating. If you perspire frequently, be sure to change out your compression camisole tank top. Localized irritation, small dermal breakouts, & sensitivities are normal with heightened compression. These presentations can be offset with medicated powder, showering again with hibicleanse or dial soap, and icing sore areas.

Showering & product use: Past day 10 postOp, stop showering with Hibiclens and/or Dial soap. Best practices recommend showering with your back to the shower stream or move the shower head to the wall; don't allow shower stream to directly hit incisions until they fully heal. Covering incisions with waterproof tape such as tegaderm is helpful. Blow dry incisional lines after showering on low setting until fully healed.



(antibacterial cleansers)

SUPPLEMENTS: FOR CLIENTS WITH GOOD HEALTH HISTORY

Iron: take 40-60mg daily, avoid iron inhibiting foods, and keep a diet high with protein and iron rich foods. Avoid liquid IV packets (high in sodium).

Vitamin C: take daily for nutrient absorption following guidelines listed on product

Vitamin D: take daily to help improve circulation following guidelines listed on product

Multivitamin: take once a day following guidelines listed on product

Stool softeners: recommended day after surgery; continue to take until first bowel movement. Body lift clients continue to take until incision is fully healed. Take once a day following guidelines listed on product. Arnica: if ingested, take following guidelines listed on product. Apply topically to bruising freely as needed.

Bromelain: found in pineapples and pineapple tea, drink daily as needed. If taking in supplement form, follow product guidelines listed.

Folic acid: take 400mg once a day to offset malnutrition

Zinc: take 25-50mg once a day to encourage incisional healing & boost immune system



AT HOME CARE INSTRUCTIONS - PAST THE FIRST 24 HOURS

DRESSING CARE

Avoid peroxide & alcohol on open wounds. Peroxide should only be used to clean dried blood out of garments. To clean wounds, use a wound care wash or saline solution; avoid cleansing areas with soap and water. Moisturize with an antimicrobial emollient. Medicated/antibiotic powder may be used if needed for moisture control (Teccasol or Sulpha). Redress your wounds with NONSTICK MEDICAL GAUZE. If you have any questions about dressing or cleaning your wounds, contact a local wound care center or your primary care physician.

Drain management: Tracking fluid production helps to know when it's time to remove your drain. Drains should stay in until you are releasing less than 25ML in a 24hr period. Until this timeframe, milk your drain a few times each day (coat the outside of the drain with an antimicrobial oil, pinch, and strip from the top of the drain down to the tube opening. Use a 20ML syringe to help release any clogs. Cleanse the drain tube, tube opening, and reservoir opening with an alcohol wipe before reconnecting.

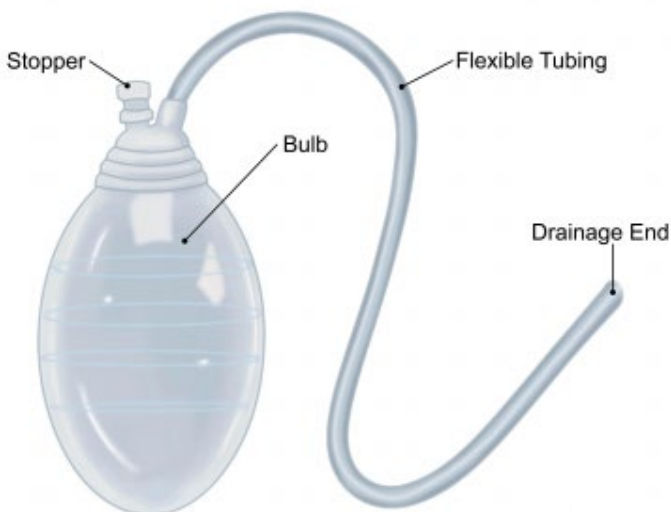
Secure drain with padding underneath incision opening with nonstick medical gauze; this will also capture any leaking fluid. Monitor and change out throughout the day as needed to help keep incisions dry

HYDRATION

The goal is to drink a little over half of your body weight in ounces. However, that isn't safely achieved by VSG or bariatric clients. Post-bariatric clients should try to hydrate to the best of their ability setting a goal of 48-64oz per day, while all other clients aim for half of their body weight in ounces

HOW MUCH WATER SHOULD YOU DRINK?

BODY WEIGHT	WATER INTAKE	8 oz GLASSES
80 lbs	40 oz / 1.2 L	5
100 lbs	50 oz / 1.5 L	6
120 lbs	60 oz / 1.8 L	8
140 lbs	70 oz / 2.1 L	9
160 lbs	80 oz / 2.4 L	10
180 lbs	90 oz / 2.7 L	11
200 lbs	100 oz / 3 L	13
220 lbs	110 oz / 3.3 L	14
240 lbs	120 oz / 3.5 L	15
260 lbs	130 oz / 3.8 L	16
280 lbs	140 oz / 4.1 L	18
300 lbs	150 oz / 4.4 L	19



DIET

Continue to avoid items & follow dietary instructions mentioned in the 24hr care section. Also avoid iron inhibitors, foods high in sugary carbs, & minimize dairy intake. Increase leafy greens, foods high in healthy fats, proteins, and electrolytes. Healthy daily sodium intake should be approximately 1000-1500mg.

- Abstain from consuming any alcohol until 6 weeks postOp. Note: consuming alcohol may encourage slower healing times.
- Avoid following a keto diet until 8 weeks postOp if you had a fat graft.
- Avoid smoke inhalation of any kind until at least 3 weeks postOp



Movement Rule: 1000 steps x weeks PO

MOVEMENT

Continue to follow dietary instructions mentioned in the 24hr care section. Additionally, set a goal to walk 1000 steps per day x however many weeks postOp you are up til 8 weeks. For example, if you are 3 weeks postop, you should be taking 3000 steps per day.

You may start a low intensity workout regimen at week 6 postOp; nothing ballistic (bouncing; ie. no elliptical) & non weight bearing. You may return to a normal workout schedule at 8 weeks postOp pending a good bill of health free of any complications.

POSTURES & POSITIONING

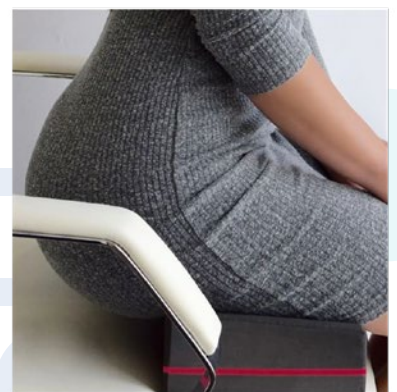
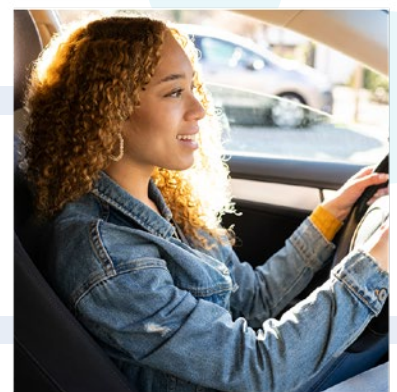
The way you “hold” your body will effect how you heal. It is important to lay, sit, or stand evenly. If you have one hip hiked up higher than the other, or a crunched side from favoring an uneven position it will affect how evenly the skin adheres and heals. When standing, try to stand with weight evenly distributed between both feet. When sitting, try to sit with weight evenly distributed throughout your torso and hips, balancing weight from front to back as best as possible. When laying, make sure weight is evenly distributed throughout hips and torso. If you lay on one side for a period of time to find comfort, switch to the other side to even it out.

Note: direct pressure should never be applied to fat grafted areas before 3 weeks postOp.

Sitting: (after a BBL) you may start sitting using a BBL pillow at 3 weeks postOp in 30min increments; after this time period, you need to get up and walk around for a few minutes for circulation and then return to sitting until the next increment is up. You may start free sitting without a pillow at 8 weeks postOp.

Driving: (after a BBL) follow sitting instructions. (after a body lift) You may start driving again once you have control of your core abdomen. Be aware of how you are positioned while driving so as to not lean to one side more than the other.

Flying: You are free to fly as needed, minding the above sitting parameters. Note: the internal cabin pressure may cause swelling to rise. This is temporary and will go away within a few hours after exiting the flight.



MANUAL MANIPULATION SCHEDULE

The first week it is suggested to receive light pressure manual manipulation treatments once a day (not to last longer than 90min max), every day for the first 7 days. This schedule may be adjusted according to skin sensitivities and tolerance. Based upon health and individual response, should you be unable to withstand being touched, shift to receiving treatments once every other day for the first week. Treatments may start between day 1 and day 3 postOp depending on health and temperament.

(If applicable) after flying home, wait 24-48hrs before receiving your next treatment.

A general suggestive postop-indur manual manipulation schedule to maintain for treatments thereafter: a frequency of 2 days a week, at least 2 days apart from each other for 4 weeks. After this time frame, you may drop down to one time a week for 2 weeks. Then, drop down to one time a week every other week. Then, once a month. You may switch to maintenance treatments once every 3-6 months, or body contouring, pending a clean bill of health free of complications.

Note: *Overstimulating the body may encourage slower healing times. The body shouldn't become dependent on the manual circulatory treatments and needs to be weaned off for optimal healing. Around week 3-4, speak with your CSL Therapist about which customized frequency massage schedule would be best for your health, foundation, and body goals.*



MACHINE WORK



There are only a small amount of machines approved to be used on your body immediately after plastic surgery. One of the best pre-approved devices that can be safely used is a physiotherapy ultrasound machine. Other machines include a vibration plate, light therapy devices, & a g5 percussion device. Body Contouring tools, equipment, and machines should be avoided until your body is able to handle that level of trauma (which is usually around week 8 postOp). Speak with your PostOp-Indur or CSL Therapist about approved devices.