



YOUR
COMPLETE
GUIDE TO

*Nose
Reshaping*

William Truswell, M.D. • Paul S. Nassif, M.D.
Jon Mendelsohn, M.D. • David A.F. Ellis, M.D.
Harrison C. Putman III, M.D.

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I also would like to thank Frances Sharpe for her editorial support on this project.

—William Truswell, M.D., F.A.C.S.

This book would not have been possible without the motivation and love that my Mother, Queen Anne, gave me. As she now plays in heaven, I can feel her ever-strong presence

always urging me to be the best father, husband, man, and surgeon that I can be.

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Paul Nassif, M.D., F.A.C.S.

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—Jon Mendelsohn, M.D., F.A.C.S.

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—Harrison C. Putman III, M.D., F.A.C.S.

*I*would like to thank my wife, Craig, for her love and support. She and our children, Whitney and Trevor, have always been enthusiastic supporters of my endeavors, allowing me to pursue the goals I set for myself many years ago

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For the last twenty years I have had a fellowship in facial plastic surgery sponsored both by the University of Toronto and the American Academy of Facial Plastic and Reconstructive Surgery. The benefits are twofold. Not only can I teach surgeons the craft of facial plastic surgery, but I also learn from them. Thank you to all my fellows who have participated in my practice. They have gone on to enhance the proficiency of facial plastic surgery and impart their knowledge to others.

I would also like to thank the American Academy of Facial Plastic and Reconstructive Surgery, for its education, support, and guidance for facial plastic surgeons both in North America and internationally. I am proud to be a member of such an organization.

—David Ellis, M.D., F.A.C.S.

Introduction

Cosmetic surgery has never been more popular or more accepted in our society. In recent years, millions of Americans from all walks of life have chosen to enhance their appearance and improve their self-image with a little nip/tuck. In addition, because of the rising popularity of cosmetic surgery, there has never been more information available about it.

Once whispered about in hushed tones, cosmetic surgery is now the subject of prime-time television shows, mainstream magazine articles, websites, and even radio broadcasts. But this wealth of information can be confusing if you're considering a procedure such as rhinoplasty. How do you know which sources to trust?

We hope to provide you with an in-depth look at rhinoplasty—from how to find a qualified facial plastic surgeon to what to expect during the recovery period after surgery. Although this book is designed to provide you with the most complete and up-to-date information available, it isn't meant to take the place of a consultation with a facial plastic surgeon. If you're considering nose surgery, we encourage you to use this book as a resource. With the information it contains, we hope you'll be better prepared to ask the right questions and to make the best choices.



CHAPTER ONE

Nose Reshaping: An Overview

Nose Reshaping: An Overview

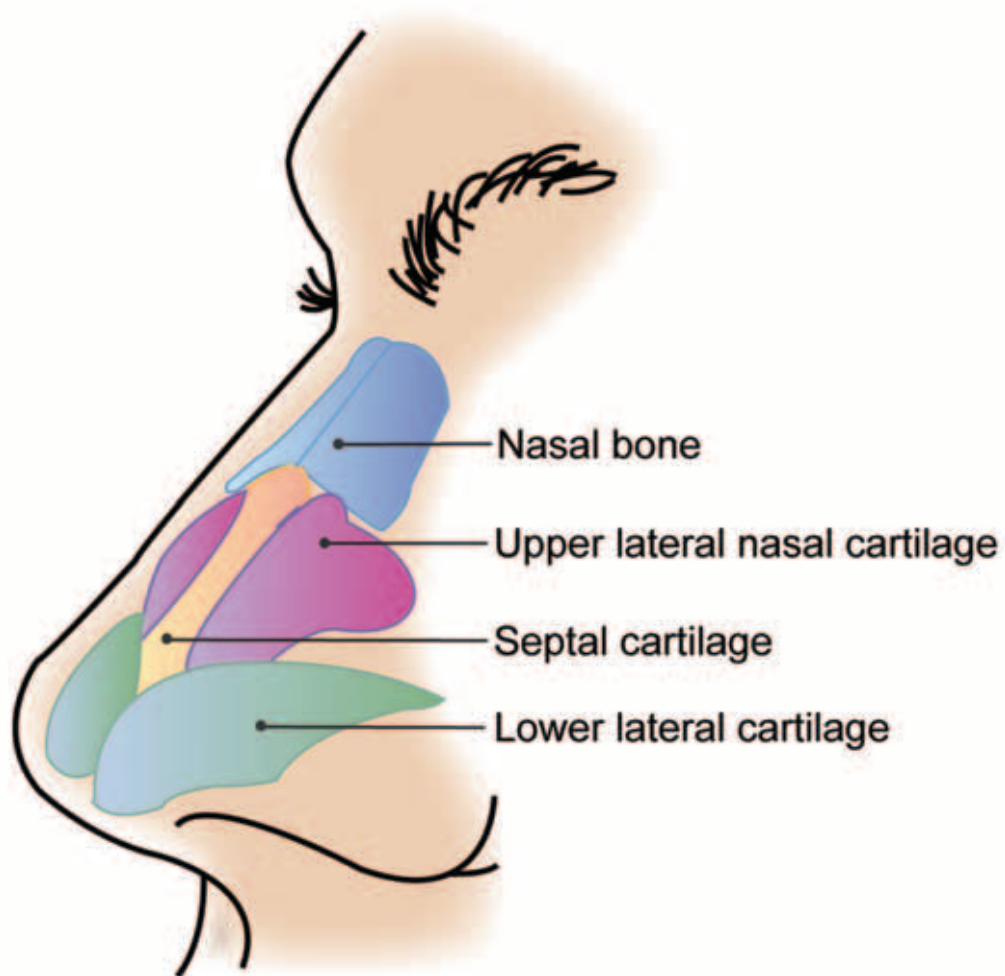
Your nose is perhaps the most defining characteristic of your face, and if the size or shape of your nose is out of balance with the rest of your facial features, you may be self-conscious about it. Of course, this is all relative. For some individuals, a small bump on the bridge of the nose is embarrassing, while for others, a slight bump may not be an issue. One person may be embarrassed about having a large nose, whereas another person may not be bothered by it.

If you have long been uncomfortable with the size or shape of your nose, you may be considering nose reshaping. For years, surgery to reshape the nose has ranked among the five most popular facial cosmetic surgery procedures. In fact, each year more than 300,000 Americans undergo procedures to sculpt the nose.

What Is Nose Reshaping?

Nose reshaping, called *rhinoplasty*, is a surgical procedure that redefines the contours of your nose. Rhinoplasty, commonly referred to as a “nose job,” can be performed for purely cosmetic reasons, to create a nose that is more harmonious with the rest of your face. It can also be performed to improve a person’s breathing function if structures inside

Anatomy of the Nose



the nose block the passage of air. In most cases, rhinoplasty can address both cosmetic and functional issues.

Among facial plastic surgeons, nose reshaping is considered to be one of the most complex of all facial cosmetic procedures. Why? Because the nose is a complex structure, including bones, cartilage, skin, mucous membranes, hair follicles, glands, muscles, ligaments, blood vessels, and nerves. Making changes to any of these elements can affect the other structures within the nose and can ultimately affect functionality as well as appearance. When making refinements to a nose, a surgeon must consider all of these elements in order to achieve a pleasing, aesthetic result while preserving function.

Improvements to your nose may be subtle or dramatic depending on your circumstances. However, even minor alterations to your nose can significantly enhance your appearance and self-confidence.

It's important to understand that having nose surgery isn't like shopping for a new outfit. There is no catalog of noses in different sizes and shapes that you look through to choose your new nose. A surgeon can make improvements—softening a hump, straightening a crooked nose, or reducing the size of the tip, for example. In general, your surgeon will fine-tune specific features you don't like about your nose while maintaining its uniqueness and character.

Ideally, following surgery, your nose should look natural and be more balanced with the rest of your face. It shouldn't look like you've had a nose job. Following rhinoplasty, you may be surprised to discover that friends and coworkers don't realize that your enhanced appearance is due to nose surgery. Your mom or best friend may be the only one to notice the difference in your nose.

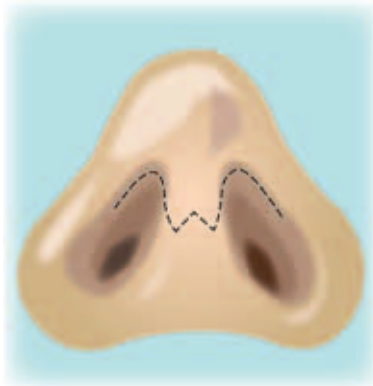
Types of Rhinoplasty Procedures

Although each procedure is tailored to individual needs, there are two basic types of rhinoplasty: open and closed. The type your surgeon

chooses to perform will depend on the complexity of the reshaping to be done to your nose and on his or her personal preferences.

Closed Rhinoplasty

When closed, or endonasal, rhinoplasty is performed, all the incisions are made inside the nose. Working solely within the nose means that the surgeon has a limited view of the bone and cartilage that is being reshaped. In spite of the challenges presented by the limited view, many surgeons are well trained in this method and achieve excellent results with it. In general, *closed rhinoplasty* may be considered sufficient for simpler rhinoplasty procedures but may not be the best choice for complex procedures or revision of a previous nose surgery.



Incision for open rhinoplasty

Open Rhinoplasty

In open, or external, rhinoplasty, the surgeon makes incisions inside the nose but also makes a small incision across the *columella*, the strip of tissue at the base of the nose that separates the nostrils. The nose skin is then lifted away from the underlying nasal structures, providing the surgeon with a clear view of the cartilage and bone to be reshaped. Greater visibility is a major benefit that allows the surgeon to make precise refinements. This method leaves a small scar from the incision on the columella, although it is often virtually invisible when completely healed. *Open rhinoplasty* may also lead to increased swelling. Open rhinoplasty is often preferred for more complex or challenging procedures, including revision of a previous nose surgery.



Making Functional Improvements

Whether open or closed rhinoplasty is used, your surgeon may use various surgical techniques to improve the function of your nose in addition to enhancing its appearance. Functional improvements are intended to allow you to breathe more freely. The most common functional improvement made during rhinoplasty involves correcting a crooked or *deviated septum*. When the *septum*, which separates the two nostrils, is deviated, it can create a blockage in one of your nostrils. This airway obstruction can lead to breathing problems. During your procedure, your surgeon may also make functional improvements involving other tissues within the nose.

Ethnic Nose Reshaping

Rhinoplasty can change ethnic nasal traits. Depending on your particular desires, it can build up the bridge of your nose or narrow the width of your nostrils. However, if you're hoping to completely eliminate the ethnic character of your nose, you should be aware that this usually can't be done and still maintain a balance in the facial features. In most cases, refinements can be made to certain traits, but the nose won't lose all of its ethnic characteristics. Be sure to discuss any concerns about maintaining or eliminating ethnic characteristics with your doctor.

Limitations of Nose Reshaping

There are limitations to what rhinoplasty can correct. The amount of correction that can be achieved with your nose depends on certain characteristics and traits, such as your skin texture and thickness and the underlying support system of bones and cartilage in your nose. If your skin is very thick, it may limit the amount of fine tuning that can be accomplished, especially in the nasal tip. Think of it this way: If you put a shoe on a bed and cover it with a sheet, you can probably still tell that it's a shoe. However, throw a blanket over the shoe and you probably won't be able to identify it. It's the same principle with noses. A surgeon

can refine the underlying bones and cartilage within your nose, but if you have thick skin covering them, the changes may not be clearly evident.

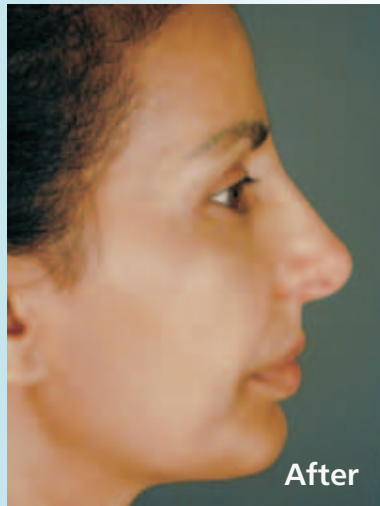
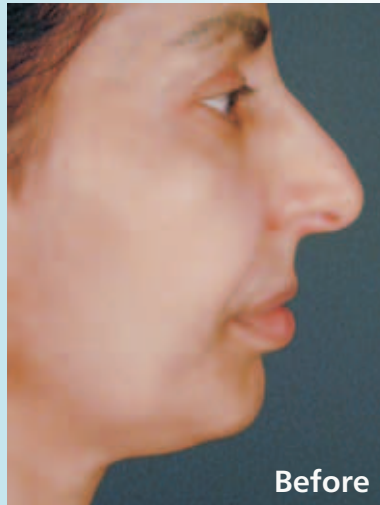
In some instances, the need to maintain nasal support and function can limit the degree of sculpting a surgeon can perform. In addition, the structures of the nose have “memory” and may try to reassume their presurgery shape. For example, a very crooked nose may look vastly improved following a surgical procedure. But as time goes by, it may have a tendency to bend again.

Are You a Candidate for Rhinoplasty?

If you feel self-conscious about your nose for any reason, you may be a candidate for nose reshaping. For instance, if you think your nose is too large for your face, if you have a bump on the bridge of your nose, if your nose is crooked or asymmetrical, if the tip droops or appears to be too thick, or if your nostrils seem too wide, you may want to consider rhinoplasty. Likewise, if you’ve broken your nose, or if you don’t like the way it’s changed due to aging, you may see improvements from nose reshaping. In addition, if you suffer from breathing problems, your surgeon may be able to correct these. To determine if you’re a good candidate for nose surgery, a surgeon will evaluate several things, including your expectations, your age, your health, your mental well-being, and your attitude.

Expectations

A realistic level of expectations is the single most important thing facial plastic surgeons look for in rhinoplasty patients. If you realize that the goal of nose reshaping is to improve the traits you currently possess rather than to create a “perfect” nose, you’re more likely to be satisfied with your results. In addition, it’s important to understand that rhinoplasty will change your nose, but not your life. It may give you a boost in confidence, but it won’t improve your relationships, earn you a promotion at work, or solve your other problems.



Age Requirements

Nose surgery can be performed on men and women of almost any age—from teenagers to seniors. In general, rhinoplasty patients tend to be younger than patients seeking other types of cosmetic plastic surgery. More than 60 percent of rhinoplasty patients are under the age of 40, and rhinoplasty is overwhelmingly the most common cosmetic surgical procedure performed on people under the age of 20. However, surgeons usually prefer to postpone surgery on very young persons until they've stopped growing—at around 13 to 15 years of age for girls and about 16 to 18 years of age for boys. Waiting until an individual has reached maturity is extremely important. Why? The septum in the nose affects the growth of the midface, including the cheeks. Any changes or injuries to the septum before it has reached full maturity can affect the development of the midface, leading to imbalances in your facial features. In some cases, young patients who have suffered injury to the nose can undergo rhinoplasty to correct the nose alignment.

On the other end of the age spectrum, however, there's no limit. Even if you're in your golden years, you can see improvements with rhinoplasty. No matter what your age, it's important to be in good overall health.

Emotional Health

Your mental well-being is another important factor in determining whether surgery is right for you. In general, if you're happy with your life and you're emotionally stable, you're likely to be considered a good candidate for surgery. Your motivation for seeking rhinoplasty is a good indicator of your mental well-being. If you're seeking cosmetic surgery to please yourself as opposed to trying to please a spouse, boyfriend, or girlfriend, you're likely to be viewed as a good candidate.

A good attitude is another factor surgeons consider. It's important to be willing to take an active role in the cosmetic surgery process. It's your responsibility to research the procedure, to choose a qualified surgeon, to

ask questions, to communicate clearly what you'd like to change about your nose, to follow pre- and postoperative instructions, and to show up for any follow-up appointments. When you take an active role in the process, you're more likely to be pleased with the results.

When Rhinoplasty May Not Be Right for You

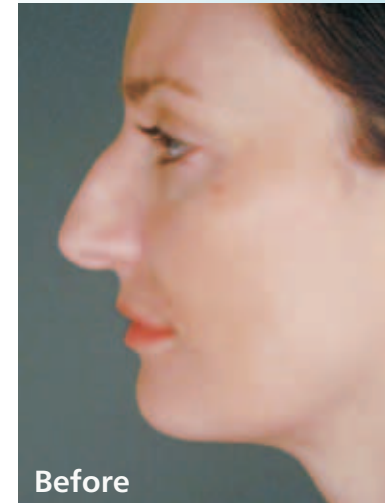
In some instances, rhinoplasty may not be appropriate for you. Unrealistic expectations, chronic health conditions, or a poor attitude may indicate that surgery isn't the best option for you. However, these factors won't automatically exclude you from having nose surgery. In some instances, you may need to consider postponing surgery, or you may be required to undergo additional medical testing to ensure that it's safe for you to have surgery.

Unrealistic Expectations

If your expectations are unrealistic, you probably won't be satisfied with your results. For example, if you're hoping to come out of surgery with your favorite celebrity's nose, you're going to be disappointed. Similarly, if you're hoping that a nose job will save your marriage or make your friends like you more, you're setting yourself up for a letdown. This is why it's so important for you to communicate specific things you'd like to change about your nose rather than simply saying, "It's too big" or "I hate it." Based on your specific goals, your surgeon can inform you whether or not your goals are attainable.

Chronic Health Problems

In some cases, health conditions may be a factor. If you suffer from uncontrolled heart, kidney, lung, or liver disease, you may not be a suitable candidate for any elective cosmetic surgery. Uncontrolled high blood pressure or diabetes and autoimmune, endocrine, or connective-tissue diseases may also be cause for concern. Suffering from any of these conditions doesn't completely rule out nose surgery, but you



Questions to Ask Yourself

- Whom are you hoping to please by undergoing rhinoplasty?
- Can you clearly communicate what you would like to change about your nose?
- Are you seeking improvement or perfection?
- Are you hoping to alleviate breathing problems with nose surgery?
- Are you willing to do your part to ensure the best possible results?
- If you smoke, are you willing to quit for several weeks before and after your procedure?

may be required to undergo additional medical testing before a surgeon will accept you as a patient.

If you're a heavy user of nasal sprays to combat breathing troubles, your surgeon will have to carefully evaluate your case. In some instances, routine use of nasal sprays can cause functional problems and make nose surgery unadvisable. Be sure to discuss your use of such sprays with your surgeon.

Timing of the Surgery

If you've suffered an injury to your nose, this may be a factor in the results you can expect. For example, scar tissue within the nose or missing cartilage or bone may affect your results. If you've recently suffered an injury, such as a fracture, you may be advised to wait until the swelling has completely subsided before making surgical refinements and repairs to your nose. Depending on your specific injury, this could take weeks or months. Minor injuries to the nose usually aren't cause for concern. Be sure to discuss all previous injuries with your surgeon.

Are You a Smoker?

If you're a smoker, your surgeon will urge you to quit for a certain period of time before and after surgery. Smoking reduces blood circulation to the skin, which slows the healing process and increases the risks of complications after surgery. In rare cases, smokers can experience skin death, or *necrosis*, due to a lack of adequate blood supply to the skin on the nose. Similarly, if you use recreational drugs, especially cocaine, you'll need to stop. Cocaine restricts blood flow, which slows the healing process and increases the risks of surgery. Cocaine can also lead to a perforated septum, which is a hole in the septum.

Mental Health

If you aren't feeling emotionally stable or you're in the middle of a highly stressful situation, you may want to delay surgery until you're

feeling stronger. If you suffer from depression, you have to realize that changing your nose isn't going to make your depression vanish. However, mild depression or anxiety won't automatically rule you out as a candidate for rhinoplasty. It's important to make your surgeon aware of any mental or emotional issues.

Finally, if you aren't willing to do your part to ensure the best possible results, you may not be a good candidate for nose surgery. For instance, if you aren't willing to follow the pre- and postoperative instructions, surgery may not be for you.

What's the Next Step?

To find out more about rhinoplasty, you may wish to begin your search for a facial plastic surgeon and arrange a consultation. Before your consultation, learn as much as you can about the procedure by visiting reputable websites, such as those listed in the Resources section of this book. As you research rhinoplasty, make a list of questions to ask during your consultation. Also, spend some time looking at your nose in the mirror and write down specific things that bother you. Having questions in hand and specific goals in mind will help you make the most of your consultation.



CHAPTER TWO

Choosing a Cosmetic Surgeon

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Choosing a Cosmetic Surgeon

If you choose to further explore having a rhinoplasty procedure, one of the most important decisions you'll make is the selection of a surgeon. Choosing a highly qualified and experienced facial plastic surgeon is key to ensuring the safety and success of your procedure. Because this is such a crucial step in the cosmetic surgery process, you should be prepared to spend some time on it. With thousands of surgeons and physicians throughout the nation offering cosmetic surgery procedures, singling out the right one can seem like a daunting task.

Ways to Find the Right Surgeon

There are several ways to find a qualified facial plastic surgeon. To begin your search, you should tap into trusted sources. One of the best ways to find a good facial plastic surgeon is through “word of mouth”; ask for recommendations from friends, family members, and personal acquaintances. If a trusted friend or acquaintance has had a good experience and a good result with a particular surgeon, you may wish to put that surgeon's name on a list for further investigation. However, note that if your friend had a great experience and a great result with a procedure other than rhinoplasty, such as breast implants or liposuction,

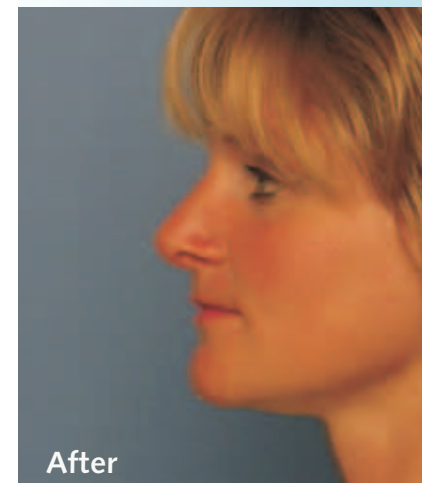
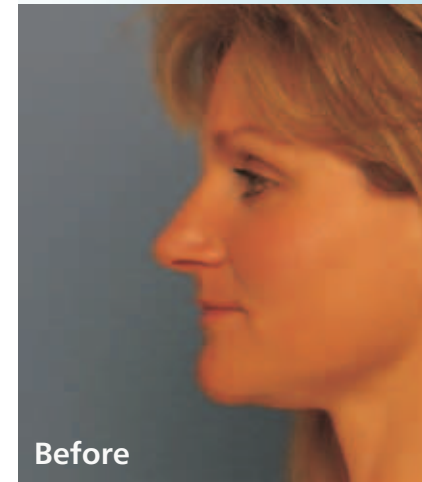
it doesn't necessarily mean that the surgeon is equally experienced in performing rhinoplasty. When you ask for referrals, it's best to ask specifically about surgeons who perform rhinoplasty.

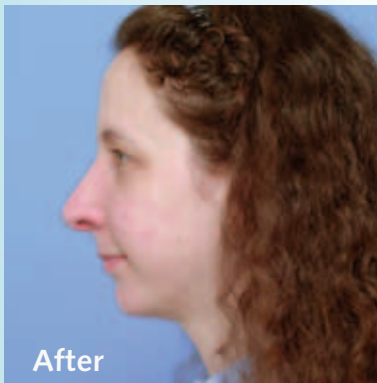
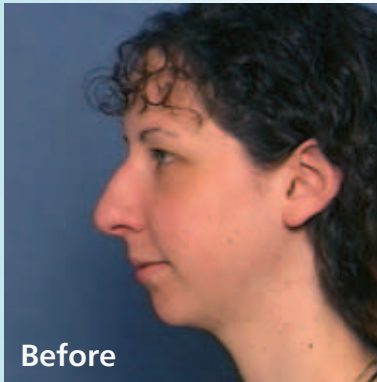
Other trustworthy referral sources are your personal physicians, such as your primary care physician, gynecologist, or dermatologist. These physicians receive many reports from their patients about the cosmetic surgery procedures they've had and the cosmetic surgeons who performed them. In addition, doctors network with other doctors and often hear about surgeons who are doing quality work. For these reasons, your personal physicians may be able to give you a few names to add to your list. Once you have some physicians' names on your list, visit their websites. Just by browsing these websites, you might get a better feel for the surgeons and their experience with rhinoplasty.

The Internet may be helpful in finding facial plastic surgeons. However, searching for surgeons online can have pitfalls. Many plastic surgery sites feature a search function to find a surgeon in your area. However, these sites don't necessarily feature the best surgeons in your area. Rather, they simply list any physician who pays a fee to the website, which offers no verification of the surgeon's credentials. Fortunately, there are reputable websites featuring a "physician finder" section that lists only cosmetic surgeons who meet stringent criteria. These sites include the American Academy of Facial Plastic and Reconstructive Surgery (www.aafprs.org), the American Society for Aesthetic Plastic Surgery (www.surgery.org), and the American Society of Plastic Surgeons (www.plasticsurgery.org).

Surgeon Qualifications

Certainly you want a surgeon who has the proper qualifications. But what qualifications should you look for? When searching for a surgeon for your rhinoplasty procedure, you need to look for several things. The surgeon should be a licensed physician with adequate training, board certification, and sufficient experience performing rhinoplasty. If you've already had one or more nose surgeries, and you would like to make





further improvements, you should look for a surgeon who specializes in revision rhinoplasty.

Training and Education

Becoming a facial plastic surgeon requires the completion of several years of formal education and training. Education requirements include graduating from a four-year college or university with a bachelor's degree and then graduating from a four-year accredited medical school with an M.D. degree. An accredited medical school is one that meets national standards set by a national authority for medical education programs.

Doctors who wish to perform facial plastic surgery must then complete at least five years of additional hospital training called a *residency*. During a residency, the physician in training, known as a resident, works closely with senior-level surgeons to observe their work and gain hands-on experience in the operating room. Once the residency is completed, the doctor can go into practice as a facial plastic surgeon. Some surgeons continue their training with a highly selective one-year fellowship in facial plastic surgery offered by the American Academy of Facial and Reconstructive Plastic Surgery (AAFPRS). At the completion of the fellowship, surgeons are required to take yet another rigorous written and oral examination given by the American Board of Facial Plastic and Reconstructive Surgery (ABFPRS). However, training doesn't end there. Facial plastic surgeons are required to take continuing medical education courses throughout their careers.

Licensure

In order to practice medicine, a facial plastic surgeon is required to be licensed by the state in which the surgeon's office is located. State licensing is mandatory, and licenses are usually granted only to medical school graduates who pass a comprehensive exam. Each state has slightly different requirements, so if a physician relocates, he or she needs to acquire a new state license. To verify that your facial plastic surgeon is licensed, you can check with your state's medical board. You can also

check with the medical board to see if any complaints have been lodged or disciplinary actions taken against a surgeon. A list of state medical boards and links to their websites are available on the Federation of State Medical Boards website (www.fsmb.org/directory_smb.html).

Board Certification

If you've done your research, you've probably heard that it's important to select a "board-certified" facial plastic surgeon. But what does it mean to be board-certified, and why is it important? Board certification means that a facial plastic surgeon has completed an accredited residency program of at least five years and has passed written and oral exams given by either the American Board of Otolaryngology (head and neck surgery) or the American Board of Plastic Surgery. Once a doctor is certified by the board, he or she is called a *diplomate*. A physician whose certification is pending is called a *candidate*. You can verify board certification in otolaryngology or plastic surgery on the American Board of Medical Specialties (ABMS) website (www.abms.org).

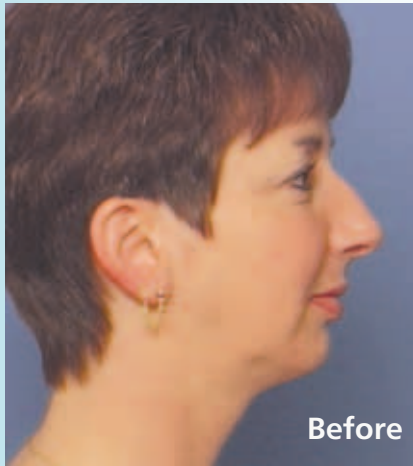
A physician isn't required to be board-certified to practice cosmetic surgery. In fact, board certification is a completely voluntary process. However, for your safety and peace of mind, you should choose only a cosmetic surgeon who is board-certified in otolaryngology or plastic surgery. Board certification provides the assurance that your surgeon is adequately trained. Some facial plastic surgeons are required to renew their certification every ten years. Be sure your surgeon's certification is up to date.

In addition to board certification, a surgeon can seek additional certification in facial plastic surgery. The American Board of Facial Plastic and Reconstructive Surgery (ABFPRS) offers certification to surgeons who are already board-certified. To qualify for certification from the ABFPRS, a surgeon must complete a two-day comprehensive exam, must have been in practice for at least two years, must have completed at least 100 facial plastic surgeries, and must subscribe to a code of ethics. Choosing a surgeon who is certified by the ABFPRS offers you additional assurance



In Canada, surgeons are certified by the Royal College of Physicians and Surgeons of Canada (www.royalcollege.ca). Once certified by this organization, the surgeon is considered a fellow of the Royal College of Physicians and Surgeons of Canada.

Canadian surgical centers are accredited by the Canadian Association of Accreditation of Ambulatory Surgery Facilities.



that your surgeon is an experienced facial plastic surgeon. You can verify an American or a Canadian surgeon's certification by the ABFPRS at the organization's website (www.afbprs.org).

A facial plastic surgeon may also be a fellow of the AAFPRS. To qualify as a fellow, a physician must already be board-certified in a specialty applicable to the head, neck and face area. In addition, the physician must have three full years in practice in plastic and reconstructive surgery of the face, head, and neck.

Surgical Experience

In addition to seeking out only board-certified facial plastic surgeons, it's imperative to select one who has ample experience performing nose surgery. But how much experience is enough? Many sources encourage you to ask your surgeon how many rhinoplasty procedures he or she performs on a yearly basis. But as a patient, how do you know the right answer? Should a surgeon be performing five rhinoplasties a year or twenty-five? Unfortunately, there's no definitive answer. However, as a general rule, you should consider only surgeons who are performing rhinoplasty on a regular basis, at least a few times a month.

The Surgical Center

When you're considering cosmetic surgery, also check out the surgical center where your procedure will be performed. Rhinoplasty can be performed in a number of settings, including outpatient surgery facilities, office-based surgical suites, and hospitals. In most cases, rhinoplasty is performed in an office-based surgical suite or an outpatient surgery facility. No matter which setting a surgeon uses, it's important to make sure the facility is licensed and accredited, which means that it meets nationally recognized standards for safety and quality.

Depending on the state in which the surgery center is located, accreditation may be offered by a number of organizations, including Medicare, the American Association for the Accreditation of Ambulatory Surgery Facilities, the Accreditation Association for Ambulatory Health

Care, and the Joint Commission on Accreditation of Healthcare Organizations. (For more information on these organizations, see the Resources section.) To become accredited, a facility must meet rigorous standards for surgeon credentials, equipment, personnel, and safety in the operating room. Because of these high standards, accredited surgical facilities have an excellent safety record.

Depending on the state, accreditation may be mandatory or voluntary. To ensure your safety, it's in your best interest to have your procedure performed in an accredited facility.

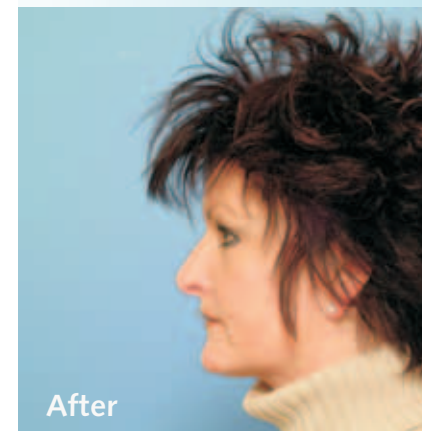
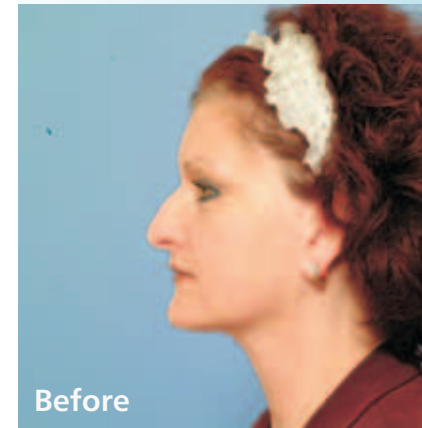
The Surgical Team

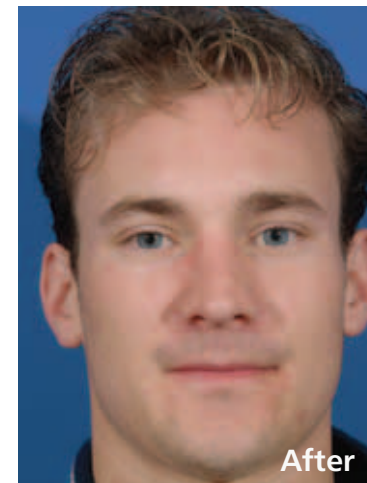
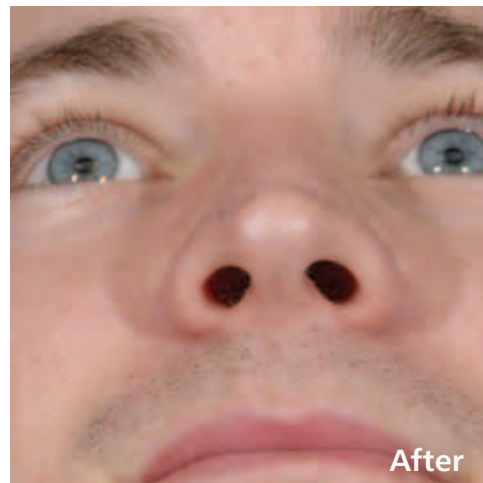
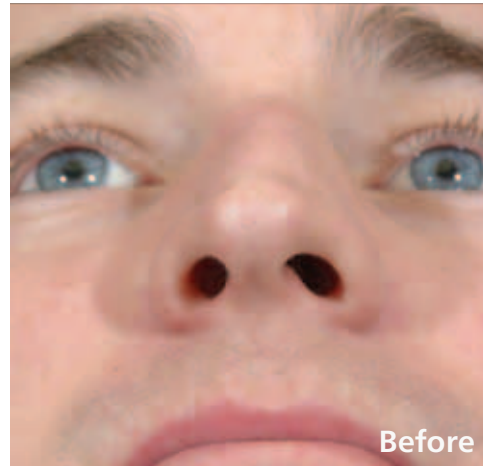
Surgeons don't perform cosmetic-surgery procedures, such as rhinoplasty, alone; they are assisted by a surgical team. The surgeon's team often includes a surgical assistant, a surgical technician, and a person who administers anesthesia. For your safety, it's a good idea to inquire about the credentials of the person administering the anesthesia.

Anesthesia should be administered by either a certified registered nurse anesthetist or a board-certified physician anesthesiologist. These professionals are specifically trained to administer anesthesia and to monitor your well-being during surgery. In the United States, certified registered nurse anesthetists currently administer approximately 65 percent of all anesthetics given to patients each year.

Traveling out of Town or Abroad for Surgery

You may be considering a cosmetic surgeon whose office isn't in your hometown. For instance, you may simply have decided to travel to have your surgery performed by the surgeon of your choosing. On the other hand, you may wish to combine surgery with a vacation, or you may prefer the privacy afforded by having your surgery out-of-town. No matter what your reasons are, you should be aware that having surgery out of town will require some additional preparations. For example, you may need to make hotel reservations for the initial recovery period





following rhinoplasty so that your surgeon can monitor your healing. Note that some surgeons who routinely see out-of-town patients may have staff who are trained to coordinate all your needs.

Traveling out of town for surgery does have its drawbacks. The most important one is that if you develop complications once you are home, you may not be able to go back to your surgeon for treatment in a timely manner. In the rare event that you do develop complications, you may need to coordinate your follow-up care with a local physician. Once again, surgeons who regularly see out-of-town patients may be able to assist you with coordinating any follow-up care needs you may have at home.

If you're considering going abroad for rhinoplasty surgery—whether you're hoping to cut costs on your procedure or you'd like to combine surgery with a foreign vacation—you should be aware of some potential problems. For example, it may be difficult to verify the credentials of both your surgeon and the surgical facility. If you aren't able to verify the education, training, and experience of your surgeon or the safety and quality of the surgical facility, you're taking a risk by consenting to surgery. In addition, if you develop complications, you probably won't be able to fly back to your surgeon for follow-up care.

Questions to Ask the Surgeon

- Are you board certified? By which board(s)?
- How often do you perform rhinoplasty?
- Is your surgical facility accredited?
- What are the credentials of the person administering anesthesia?



CHAPTER THREE

Your Consultation

3

Your Consultation

Once you've narrowed your list to one surgeon, or perhaps a couple of surgeons, make an appointment for a consultation. This face-to-face meeting with the doctor is one of the best ways to determine which facial plastic surgeon is right for you. Think of your consultation as an opportunity to ask questions, to learn more about rhinoplasty, to discover what the procedure can do for you, and to evaluate your comfort level with the surgeon and staff. You should be aware that many surgeons charge a fee for the initial consultation, although in some cases this fee is applied toward the cost of surgery.

What to Expect from Your Consultation

In most cases, you can expect your consultation to last thirty minutes to an hour or more. Most cosmetic plastic surgeons will encourage you to ask as many questions as you feel are necessary. During your consultation, you'll fill out medical history forms, and undergo a physical exam of your nose. You may spend some additional time with an office manager or nurse discussing details about the surgery process or financing. In most cases, you can expect your rhinoplasty consultation to include a discussion of the following topics:

- Your medical history
- What you would like to change about your nose
- Why you would like to change your nose
- Results you can reasonably expect
- Rhinoplasty techniques and incisions
- Length of procedure
- Type of anesthesia to be used
- The person who will be administering anesthesia
- Where your surgery will take place
- Pre- and postoperative instructions
- Common side effects, risks, and complications
- Length of time before you will see final results
- Follow-up visits
- Costs and financing options

Preparing for Your Consultation

Before your consultation, you will benefit by spending some time preparing for it. The better prepared you are, the more you'll get accomplished. It's a good idea to take a notebook with you so you can jot down notes during your consultation. If you think you'd feel more comfortable taking a spouse or a friend to your consultation, arrange to have this person accompany you. It's often helpful to have the friend or spouse take notes for you while you speak with the surgeon.

Reviewing Your Medical History

As is the case when you visit any new doctor, you'll be asked to complete a medical history form for your facial plastic surgeon. Key information you should be prepared to disclose includes:

- Previous rhinoplasty procedures
- Other previous surgeries (cosmetic and non-cosmetic)



- Recent or past injuries to your nose
- Any breathing problems
- Allergy and asthma details
- Past or current medical conditions
- Hospitalizations
- Drugs you're taking (prescription, over-the-counter, vitamins, herbs, supplements, and even illegal drugs) and their dosages
- Use of nasal sprays
- Smoking habits

Items you should take with you to your consultation include:

- Any operative notes of previous rhinoplasty procedures
- Photos of yourself before any previous rhinoplasty procedures

Why does your surgeon need to know all this information? Your medical history is important when you're contemplating nose surgery. Previous surgeries or health conditions may affect the surgery you're considering. In addition, certain medical conditions or medications you're taking could put you at risk for complications during and after surgery. As mentioned earlier, being a smoker can slow the healing process and increase the risks associated with surgery. For these reasons, you should be very thorough and completely honest in providing your medical history. Don't leave anything out of your history because you don't think it's important or because you're embarrassed about it. Concealing any health-related information could put you unnecessarily at risk.

Trying to recall your medical history off the top of your head can be difficult. For instance, do you remember the name and dosage of your asthma inhalant or the date you had your wisdom teeth extracted? If not, you may want to do a little research before your appointment. Some surgeons' offices will send you a copy of the medical form prior to your appointment so you can fill it out at home and take it with you to your consultation.

Discussing Your Goals

The consultation is your chance to discuss your goals with the surgeon. The more specific you can be about what you would like to change about your nose, the better. Some surgeons find it helpful if you can bring in photos from magazines showing noses that you like. For the most part, this is simply a way for surgeons to gauge how realistic your expectations are. In discussing your desires, your surgeon will let you know if your hopes are realistic or if your goals are out of reach.

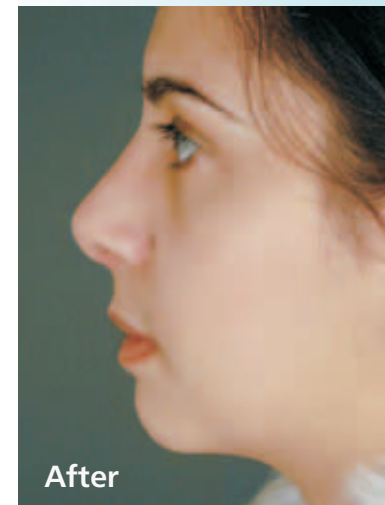
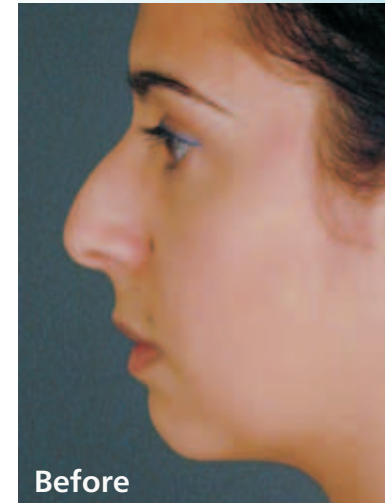
Your Nose Examination

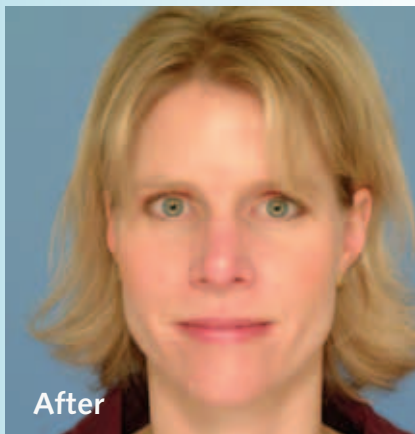
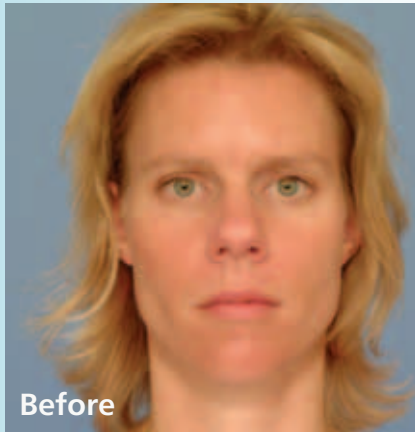
To zero in on results you can realistically expect, your surgeon will examine your nose during your consultation. He or she will carefully look at your nose from all angles. In addition, you'll be asked to tilt your head back so that the surgeon can look at the base of your nose and your nostrils. Your facial plastic surgeon may gently press on your nose to feel the underlying bones and cartilage. He or she may also gently push the tip of your nose up or down or from side to side.

To view the inside of your nose, a facial plastic surgeon will use a nasal speculum and a light. This internal exam allows the surgeon to check for any anatomical problems with airflow or your sinuses. This physical exam is painless and takes only a few minutes. From this exam, your surgeon will have a good idea of the results you can reasonably expect.

Chin Assessment

While the surgeon is assessing the appearance of your nose and its underlying anatomy, he or she will also be looking at other facial features, particularly your chin. If you have a weak or receding chin, it can make your nose seem more prominent than it really is. To bring a better balance to your facial features, a cosmetic surgeon may recommend *chin augmentation* surgery in addition to rhinoplasty. Estimates vary, but some surgeons say that approximately 10 percent of





rhinoplasty patients could benefit from chin augmentation as well. When chin augmentation is performed, you may find that you don't need as much correction in the size of your nose as you originally thought.

Computer Imaging

Facial plastic surgeons commonly use computer imaging to give you an idea of how your nose might look following rhinoplasty. At some point during your consultation, the surgeon or a staff member will take photos of your nose. Depending on your surgeon's preferences, the photos may include a frontal view, a profile view from each side of your face, a three-quarter view from each side, and a base view looking into the nostrils. Some surgeons prefer two sets of these images, one smiling and the other non-smiling.

Once the photos have been downloaded to a computer, your surgeon can manipulate them using digital-imaging software, giving you a sort of "preview" of how your nose will look after surgery. With a few clicks of the mouse, your surgeon can digitally eliminate the hump on your nose, angle the tip of your nose higher or lower, or straighten your crooked nose.

However, surgeons advise you to keep in mind that the image you see on the screen is not a guarantee of what you'll look like after surgery. Rather, it's used only to give you a rough idea of what to expect. Ask your surgeon if what you see on the screen represents the best possible outcome. If so, your results probably won't match the idealized image on the screen.

Computer imaging is a great communication tool. As your surgeon manipulates the image on the screen, use this opportunity to talk about your goals. Tell your surgeon what you like or don't like about what you see on the screen. Do you want more correction or less correction? Your surgeon will let you know if it's possible to achieve what you want. This discussion ensures that you and your surgeon are on the same page

regarding your goals and expectations. If you'd like a printout of what you see on the screen, ask your surgeon.

Viewing Before-and-After Photos

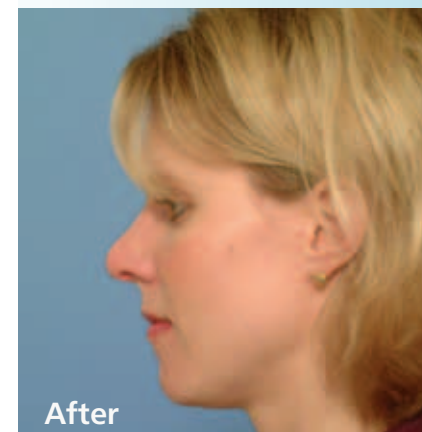
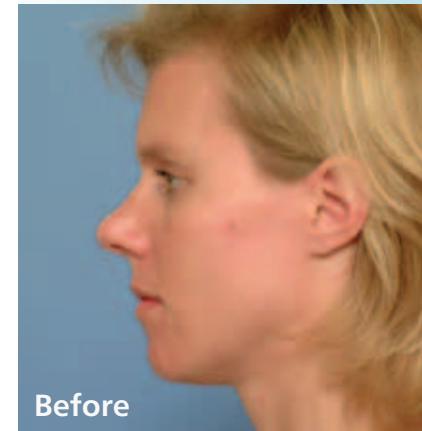
Prior to your appointment, spend some time viewing before-and-after images of your surgeon's previous rhinoplasty patients on his or her website. You may wish to review additional images during your consultation. As you look at these photos, there are several things you should consider. Do the results look natural, or do they look overdone or artificial? Do you see a broad spectrum of types of noses and types of results, or do all the noses look similar? Do you see any scars? In addition, don't be distracted by an improved hairstyle or a great tan in an "after" photo. Keep your eyes on the contours of the nose and how balanced it is with the rest of the face.

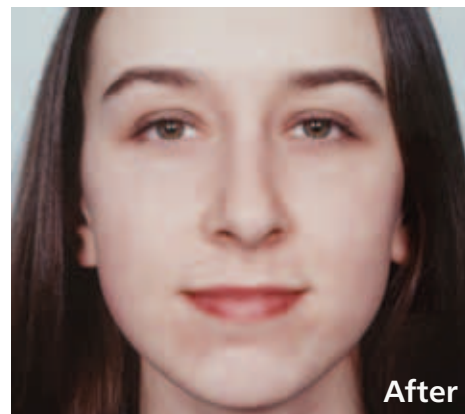
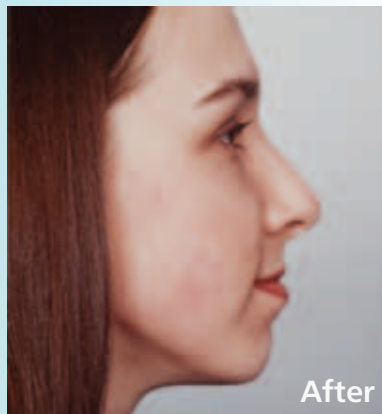
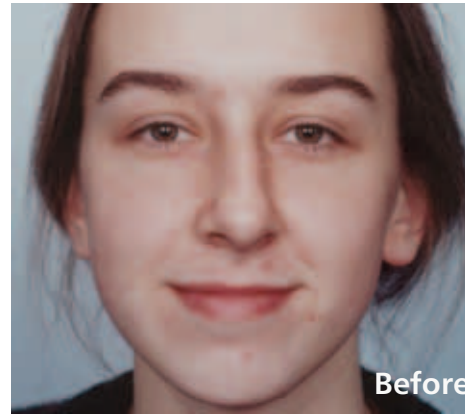
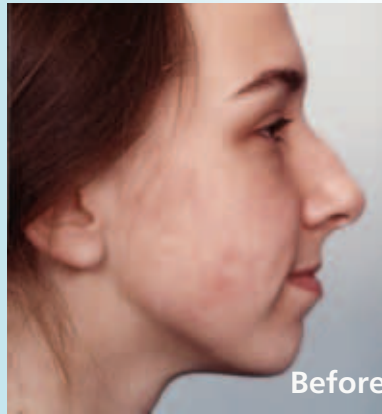
Determining the Best Surgical Techniques for You

Based on the anatomy of your nose and your goals, your surgeon will determine which surgical techniques will best help you achieve the look you desire. In your research, you may have read about various nose reshaping techniques, and you may be convinced that a certain technique is best for you. However, based on the complexity of your particular case, the surgeon may suggest a different technique. Remember that your surgeon is basing his or her recommendations on years of experience, so it's important to keep an open mind during your consultation.

Paying for Your Surgery

At some point during your consultation, you should learn about the costs associated with rhinoplasty and the various options available for paying for your surgery. When discussing the costs of surgery, it's important to ask what exactly is included in the quoted price. Does it include all pre- and postoperative office visits? Does it include the anesthesiologist's fee? Does it include the operating room fees? Are there





any additional fees? What if you develop complications or if you require revisionary surgery? By the time you leave the surgeon's office, you should know the total cost of your surgery.

Most facial plastic surgeons expect payment in full prior to your surgery date. To help you determine the best way to pay for surgery, staff members are usually available to assist you with financing options. In many offices, you can fill out a financing application during your consultation.

In general, elective cosmetic surgery procedures aren't covered by insurance. However, if your surgeon will be correcting any breathing problems during your rhinoplasty procedure, your insurance provider may pay for a portion of the surgery. This depends on the corrections being made, your insurance provider, and the type of coverage you have. Call your insurance company to determine whether any portion of your rhinoplasty procedure

will be covered. In Canada, only reconstructive rhinoplasties with measured breathing problems are covered.

Evaluating Your Rapport with the Surgeon

In addition to asking about such issues as surgeon credentials, also be aware of your rapport with the surgeon during your consultation. From the moment you walk into the surgeon's office, notice how you're treated. Are you encouraged to ask questions? Do you feel like the

surgeon is really listening to your concerns, or is he or she offering you a cookie-cutter approach to nose reshaping? Do you feel comfortable with the surgeon?

Feeling comfortable with your surgeon is key to achieving the best results possible. If you're trying to choose between a few equally qualified surgeons, your comfort level may be the deciding factor. When you feel comfortable, you're more likely to have good communication with your surgeon, and communication is important in obtaining great results.

Talking to Former Patients

One of the best ways to evaluate your surgeon is to talk to former patients who have gone through the rhinoplasty process. The experiences of such patients can give you a better idea of the quality of care you can expect from the surgeon. Therefore, you should ask to speak to a couple of the surgeon's previous rhinoplasty patients. Any qualified facial plastic surgeon should be willing to put you in contact with former patients. In fact, most qualified surgeons maintain a list of former patients who are willing to talk about their experiences with people like you who are considering nose surgery. In addition, you should read any patient testimonials on the surgeon's web site.

Questions to Ask Former Patients

- Why did you choose this surgeon?
- Were your results close to what you were shown on the computer imaging?
- Are you pleased with your results?
- Was there anything about the rhinoplasty process you weren't prepared for?
- Is there anything you wish you'd done differently?
- If you had complications, how did the surgeon handle them?
- Were there any additional costs that hadn't been discussed?
- Would you go back to this surgeon for another procedure?





CHAPTER FOUR

Preparing for Your Rhinoplasty Surgery

4

Preparing for Your Rhinoplasty Surgery

Before you set foot in the operating room, you can begin preparing for your rhinoplasty surgery. The steps you take prior to surgery will help ensure the safety and success of your procedure. Planning ahead can also help ease the stress that you may feel just prior to your surgery. And preparations made before surgery can lead to a more comfortable and enjoyable recovery after surgery.

When to Schedule Your Surgery

Consider the timing of your surgery. For instance, if you're hoping to show off your new profile at a wedding, a graduation, or some other big event, you may want to plan your surgery several months in advance. It can take up to six months or a year for the swelling to disappear completely, so plan your surgery accordingly. If you'll need to take time off from work or school, consider scheduling your surgery for a Friday so that you'll have an extra weekend to recuperate. You can schedule your rhinoplasty surgery at any time of the year; however, a study from the American Academy of Facial Plastic and Reconstructive Surgery shows that most patients elect to undergo nose surgery during the summer.

What Will You Tell People?

Before you have surgery, you might give some thought to what you wish to tell friends and family about your cosmetic surgery. Perhaps you're comfortable revealing the fact that you're having cosmetic surgery to reshape your nose. However, if you'd rather inform only a few close friends and family members, you may want to come up with an explanation for others about why you took time away from work or school.

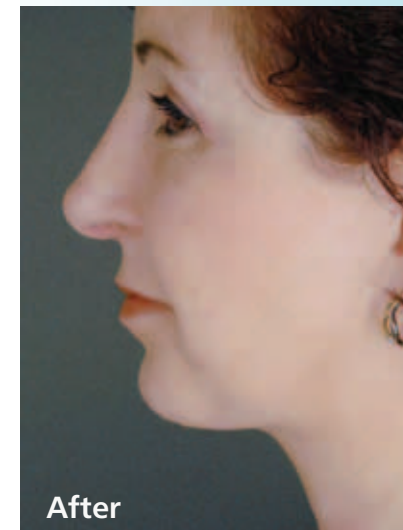
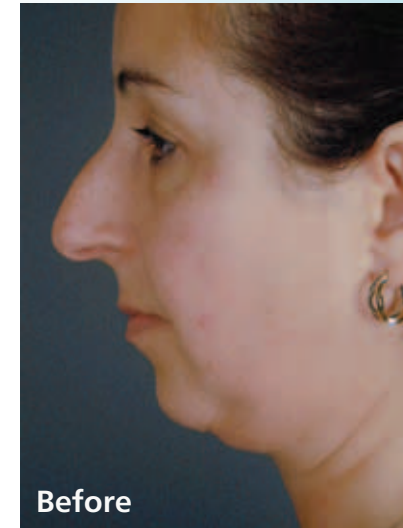
Schedule Medical Tests

Depending on your age and your medical history, you may be required to undergo certain medical tests before surgery. These tests are usually performed to alert the cosmetic surgeon to any potential health risks that may prevent you from having surgery or that might require additional monitoring during surgery.

Physical: Your surgeon may request that you undergo a general physical with your primary care physician. During the physical, your physician will likely check your eyes, ears, nose, and throat in addition to listening to your heart and lungs with a stethoscope.

Electrocardiogram (EKG or ECG): An EKG is a test that measures the electrical signals controlling the rhythm of your heart. For this painless exam, small metal discs called electrodes are attached to your chest and perhaps to your arms, back, or legs. The electrodes are connected to a machine that records electrical activity. This test can reveal irregularities in your heartbeat as well as evidence of past heart attacks. If any irregularities are noted in the test, you may be required to undergo additional testing.

Complete blood count (CBC): A complete blood count, or CBC, is a test that measures thirteen blood levels within your body. To perform this simple test, blood is drawn from a vein in your arm and analyzed by a lab technician. A CBC can reveal a number of blood deficiencies or blood disorders that could affect the safety of your procedure and the length of your recovery. For example, a deficiency of white blood cells could



Rhinoplasty along with upper and lower eyelid lift, chin implant, facelift, and necklift

increase your risk of infection after surgery. Low levels of hemoglobin, which provides oxygen to your body's tissues and skin, could slow the healing process. And you could experience increased bruising and bleeding if you have inadequate platelet levels.

Fill Prescriptions

Your surgeon will prescribe certain medications, and it's a good idea to pick them up prior to your surgery. Even if you aren't supposed to start taking some of the medications until after your surgery, it's better to have them on hand before you return home from surgery. Medications commonly prescribed for rhinoplasty patients include antibiotics, sleeping aids, anti-anxiety medications, pain medications, steroids, multivitamins, and vitamin C.

Antibiotics: Oral antibiotics are often prescribed as a preventive measure to ward off infection. If your surgeon prescribes antibiotics, be sure to take them exactly as instructed.

Sleeping aids: Getting an adequate amount of sleep following surgery can speed the healing process. For this reason, your surgeon may prescribe sleeping aids. When used as directed, these are safe to take with pain medication.

Anti-anxiety medication: To ease the anxiety associated with undergoing rhinoplasty, your surgeon may prescribe anti-anxiety pills, such as Valium. You may be instructed to take this medication the night before and/or the morning of your procedure.

Pain medications: Your surgeon will prescribe medication to keep you pain-free following surgery. In addition to your prescription pain medication, you'll be advised to get a nonprescription pain reliever, such as Tylenol, that doesn't contain aspirin or ibuprofen. Many rhinoplasty patients find that they do not need pain medication after surgery.

Steroids: To help reduce the nasal congestion that often occurs during the recovery period following rhinoplasty, you may be instructed

to take certain steroids. These steroids are taken in pill form and are safe when taken as instructed.

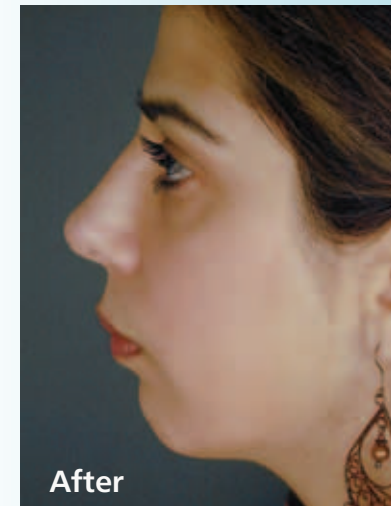
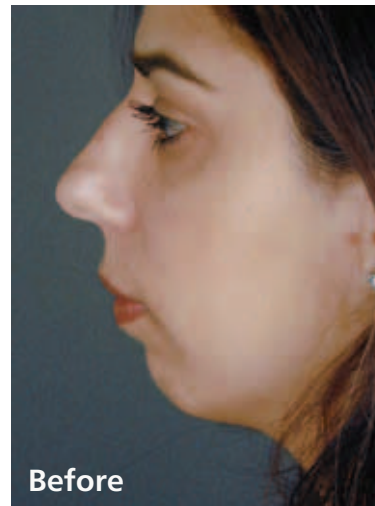
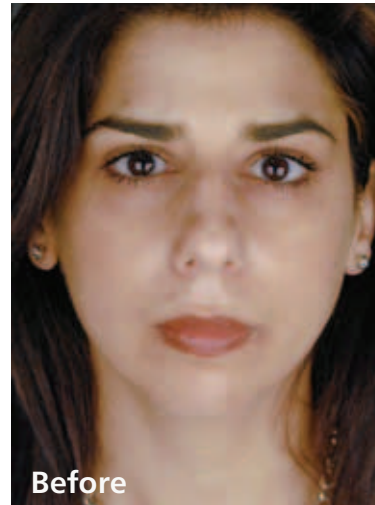
Vitamins: To improve your overall health and well-being, your surgeon may recommend that you start taking a multivitamin a few weeks prior to surgery. Your surgeon may recommend that you begin taking vitamin C a few weeks before your procedure because it promotes healing and diminishes the swelling and discoloration that follows rhinoplasty. Your surgeon may also suggest a Vitamin K injection about five days prior to your surgery to decrease bleeding.

Purchase Over-the-Counter Items

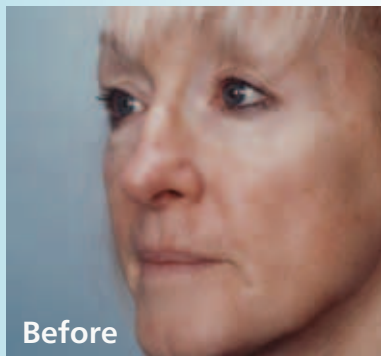
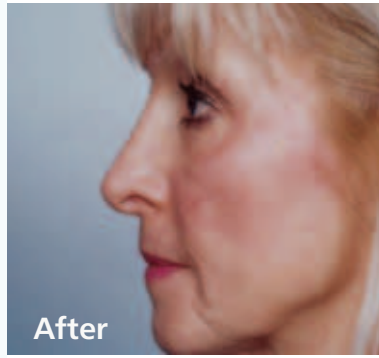
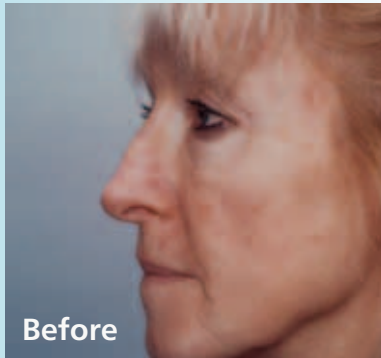
Before your procedure, be sure to purchase any over-the-counter items your surgeon has recommended. Over-the-counter products such as mild shampoos and facial cleansers are commonly recommended for use prior to facial cosmetic surgery. Other items required for your postoperative care may include hydrogen peroxide, antibacterial ointment, gauze pads, Q-Tips swabs, saline spray for the nose, and herbal remedies such as Arnica montana, which may decrease bruising.

Arrange for a Caregiver

An important task you need to take care of before surgery is to arrange for a caregiver. Your caregiver can be a spouse, a significant other, a parent, a friend, or any responsible adult with whom you feel comfortable. This person will need



Rhinoplasty and chin implant



Patient had rhinoplasty along with eyelid lift and laser skin resurfacing around mouth

to drive you to and from surgery and will need to stay with you for at least twenty-four hours following surgery.

If you would prefer the peace of mind that comes with professional care, you may wish to go to an aftercare facility following your surgery. Staffed with people who are familiar with post-operative care, these facilities can also provide transportation for you. Your surgeon's office can provide recommendations for facilities in the area where you can rest and recover in a warm and supportive environment.

Some surgeons prescribe anti-anxiety pills, or sedatives, the night before and sometimes the morning of your procedure. These pills help you to relax and get a good night's sleep. However, driving isn't advised for forty-eight hours after a sedative dosage, so you shouldn't drive yourself to your procedure. Following your procedure, you won't be allowed to drive yourself home because the effects of anesthesia can leave you feeling groggy. The surgical staff will ask you for your caregiver's name and contact information and will call this person when you're ready to go

home, unless he or she remains in the waiting room during your procedure.

Even if you're feeling okay, it's important that your caregiver stay with you for the first twenty-four hours following your rhinoplasty procedure. Anesthesia agents can remain in your system for twenty-four hours, making you feel tired and a bit "out of it." Your caregiver can be available to give your medications and to provide assistance getting around the house. In the rare event that complications arise or you have a medical emergency, your caregiver can call the surgeon or drive you

back to the surgeon's office or to a hospital. Even if your recovery is completely uneventful, you'll have peace of mind knowing that someone is there for you.

Plan for Your Recovery

Even though the recovery period doesn't begin until after your surgery, it's a good idea to start planning for it beforehand. Being prepared can make your recovery a relatively stress-free and enjoyable experience.

- Plan on taking it easy for approximately two weeks.
- Make sure you have a recliner or two to three pillows on hand since you'll have to sleep with your head elevated during recovery.
- Place everything you'll need during your recovery at least at waist height so you won't have to bend over to pick up objects.
- Do any necessary housework or laundry before your surgery so that you won't feel compelled to do it while your nose heals, when you should be resting.
- Place a table near your bed to hold all necessary items so that you won't have to get up and down continuously.
- Go grocery shopping and stock up on "soft foods," such as soup, gelatin, pudding, and protein drinks.
- Prepare a few meals ahead of time and freeze them so that you can just pop them in the microwave when needed.
- If you have children, make sure you arrange for your spouse or a babysitter to care for them while you recuperate.
- If you work, make arrangements for your work to be taken care of while you're recovering.
- Stock up on DVDs, books, magazines, CDs, and other diversions to make your recovery a more pleasant experience.

Herbal Remedies to Avoid Before Surgery

Aloe	Bilberry
Cayenne	Danshen
Dong quai	Echinacea
Ephedra	Feverfew
Garlic	Ginger
Ginkgo biloba	Ginseng
Goldenseal	Kava
Licorice	Senna
Saint-John's-wort	Valerian
Yohimbe	

This list is not complete; check with your doctor about any herbal remedies you're currently taking.

What to Avoid Before Surgery

Smoking

If you're a smoker, one of the most important things you can do to ensure the safety of your procedure and to speed the healing process is to stop smoking. Most surgeons will recommend that you quit smoking two to four weeks prior to your procedure and for two to four weeks following it. To help you kick the habit, some surgeons provide referrals to smoking cessation programs or offer prescriptions for nicotine replacement products.

Certain Medications, Vitamins, Supplements, and Herbs

Before undergoing any kind of surgery, including rhinoplasty, you'll be advised to avoid certain medications. Some medications, including some prescription drugs, vitamins, supplements, and herbs, contain elements that thin the blood and prevent it from clotting normally; this can lead to excessive bleeding during or after surgery. In general, drugs to be avoided include anything containing aspirin or ibuprofen as well as prescription blood thinners, such as coumadin. You should also stop taking vitamin E supplements, diet pills, and many herbal remedies. A number of herbal remedies not only thin the blood but may also interfere with or enhance the effects of anesthesia, which can lead to a dangerous situation in the operating room.

Your surgeon will provide you with a list of medications to avoid. If you take something that isn't on the list, don't assume that it's okay to continue taking it. Ask your doctor about it.

Alcohol

It's important to avoid drinking alcohol prior to your rhinoplasty procedure. Your surgeon may recommend avoiding alcoholic beverages for as little as a few days or for as much as a few weeks prior to your surgery. Why? Like some medications, alcohol can thin the blood, which can lead to unnecessary blood loss during surgery. In addition, alcohol

can have a dangerous effect on anesthesia or in combination with some of the medications your surgeon has prescribed.

Overexposure to the Sun, Tanning Beds, and Sunlamps

It's critical to avoid overexposure to the sun, tanning beds, and sunlamps prior to your rhinoplasty procedure. Overexposure to the sun brings more blood to the surface of the skin and can lead to increased bleeding during surgery. If your nose is sunburned, puffy, or inflamed, surgeons won't perform your procedure and you'll have to reschedule it.

The Night Before and the Day of Surgery

Follow Your Hygiene Instructions

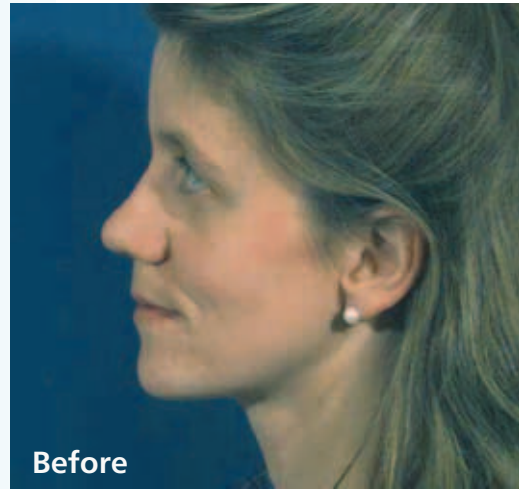
Your surgeon may give you specific instructions on washing your hair and your face the night before or the morning of your procedure. Be sure to follow these instructions closely. Most likely, you'll be asked to refrain from using any kind of hairspray or hair styling product after washing your hair. Likewise, you'll be instructed not to put on makeup after washing your face.

Remember to Fast

For your safety, it's very important to avoid eating or drinking anything after midnight the night before your procedure. This includes chewing gum, breath mints, and any kind of hard candy. The reason you're asked not to eat after midnight is to avoid problems such as vomiting while you are anesthetized. If your surgery is in the afternoon and you aren't going to be under general anesthesia, you may be instructed to eat a light breakfast no less than six hours before your procedure. You may be allowed to take a few sips of water in the morning to take any necessary medications, but check with your surgeon about doing so.

Questions to Ask Your Surgeon

- Which medications, vitamins, herbs, and supplements should I avoid?
- Are there any medications or vitamins I should begin taking?
- What medical tests should I schedule?
- What can I do now to prepare for my recovery?
- Will I be able to wear my eyeglasses following surgery?



What to Wear to the Surgery Center

When choosing what to wear on the day of surgery, remember that comfort is key. Most surgeons advise wearing a shirt, sweater, or sweatshirt that zips or buttons up the front so that you won't have to pull it over your tender nose after surgery. For additional comfort, choose pants with an elastic waistband and shoes that are easy to slip on.

What Not to Wear

You'll be advised not to wear any makeup, wigs, or jewelry on the day of your procedure. It's best to leave all of your jewelry, including wedding rings, earrings, and watches, at home. You'll be asked to remove all piercings as well as any contact lenses or eyeglasses prior to surgery. If you wear eyeglasses, you won't be able wear them for about a week after surgery. In some instances, you may be allowed to tape them to your forehead in order to protect your nose. (The bridge of the glasses is taped to the forehead, and the ear pieces rest on the ears.) Discuss issues involving your eyeglasses with your surgeon before surgery.

If You Get Sick Before Surgery

If you get a cold, a sore throat, or an infection prior to your scheduled surgery, contact your surgeon immediately. You may be instructed to begin taking antibiotics prior to your surgery. In some cases, you may need to reschedule your procedure.



CHAPTER FIVE

Your Rhinoplasty Procedure

5

Your Rhinoplasty Procedure

*T*he big day has arrived. No doubt you're excited and most likely a little anxious about undergoing your rhinoplasty procedure. Thanks to modern medicine, surgeons have fine-tuned the process of rhinoplasty, resulting in less discomfort and quicker recovery times. And although it may have been easy to spot "nose jobs" in the past, current trends in rhinoplasty have led to more natural-looking results that blend harmoniously with the rest of your face.

Arriving at the Surgery Center

When you arrive at the surgery center, you'll complete any required administrative paperwork. Part of this paperwork will include "informed consent" forms, which you'll be asked to sign. What is an informed consent form? Prior to surgery, you should receive an explanation of the procedure you're having, any risks, and the expected outcome. The informed consent form states in detail that you understand everything involved with your surgery. You should read through the consent form carefully before signing it. If you have any questions or need more information, ask your physician.

Surgery Preparation

Once you've completed the necessary forms, the preparations for surgery begin. You'll be given a hospital gown, a hairnet, and perhaps surgical booties or socks to wear. Most surgery centers have a designated area where you can leave your clothing and personal belongings. At this point, a nurse may give a sedative to help you relax.

Meeting with Your Surgeon

At some point during your surgery prep, you can expect to have a brief meeting with the surgeon to go over the procedure. This is your chance to ask any last-minute questions or to make any modifications to the wishes you had previously discussed.

As part of the preparation for your surgery, some surgeons use a special surgical marking pen to draw on your nose as a blueprint for changes to be made during surgery. These markings are usually made while you're sitting or standing rather than while you're lying down.

Meeting with the Anesthesiologist

You may also receive a brief visit from the anesthesiologist during the preparations for surgery. He or she will verify that you haven't had anything to eat or drink other than a few sips of water with any necessary medication. Your anesthesiologist will also check that you haven't been taking any of the medications your surgeon instructed you to avoid.

A quick review of your medical history may also be part of this visit. The anesthesiologist may ask you about certain medical conditions, any allergies to food or medications, and whether you or a family member have ever had any allergic reactions to anesthesia. What do food allergies have to do with anesthesia? Some anesthetics contain components of foods, such as eggs, so it's important to inform the anesthesiologist of any food allergies. And although adverse reactions to anesthesia are rare, they

Informed Consent Forms

Informed consent forms typically cover the following:

- Authorization for the surgeon to perform the procedure
- Authorization for anesthesia to be administered
- Authorization for the surgeon to perform any additional procedures deemed necessary in case of emergency or to achieve the desired results
- Authorization for the surgeon to take before-and-after photos and/or video
- Acknowledgment that you've been fully informed about your procedure
- Acknowledgment that you've been fully informed about the possible risks involved
- Acknowledgment that there are no guarantees about the results
- Acknowledgment that any computer imaging you were shown isn't a guarantee of the results you'll achieve
- Certification that you have truthfully disclosed all medical conditions, allergies, medications taken, and smoking habits
- Certification that you agree to follow the surgeon's instructions



can run in families. You should also inform your anesthesiologist about any allergies to latex.

Even though you've already included this information in your medical history, it's important to review it with the anesthesiologist. This review is done to ensure your safety during your procedure, so be sure to bring up anything you may have forgotten to include in your history. If you have any last-minute questions about anesthesia or pain control during the procedure, ask the anesthesiologist.

Placement of IV

Surgery prep will continue with the placement of an IV. The IV is usually placed in your arm or in the top of your hand and will be used to administer anesthetics, antibiotics, and other medications. Other than a slight stinging sensation when the IV is first inserted, you shouldn't feel any pain. The IV is usually taped in place with surgical tape to prevent it from moving.

Undergoing Anesthesia

Before your rhinoplasty surgery begins, some form of anesthesia will be administered to keep you pain-free during the procedure. If you feel somewhat nervous about being "put under" with anesthesia, you're not alone. It's common to experience some anxiety about undergoing anesthesia. However, you should know that anesthesia is safer than ever before. In fact, a 1999 report from the Institute of Medicine states that anesthesia is fifty times safer today than it was in the early 1980s. What makes it so much safer today? It's due to improvements in the drugs used in anesthesia, in the education of anesthesia providers, in technology, and in the techniques used for monitoring patients during surgery.

For rhinoplasty surgery, sedation anesthesia combined with local anesthetics is commonly used. However, general anesthesia may be recommended depending on the complexity of your procedure, your physical condition, your reactions to medications, and whether you

smoke. The anesthesiologist or surgeon makes the final decision about the type and level of anesthesia you receive.

Sedation Anesthesia

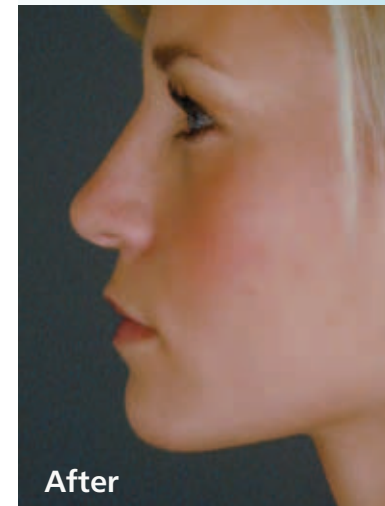
Sedation anesthesia, delivered by IV, uses pain relievers and sedatives to minimize discomfort and to induce relaxation and drowsiness. Sedation anesthesia is often combined with local anesthetics to provide additional pain relief. With sedation anesthesia, you can breathe on your own, so there is no need for a breathing tube down your throat. Sedation anesthesia agents do not remain in the body long, and you can expect to feel normal within a few hours after surgery. Sedation anesthesia is also referred to as monitored anesthesia care (MAC), twilight sedation, or conscious sedation.

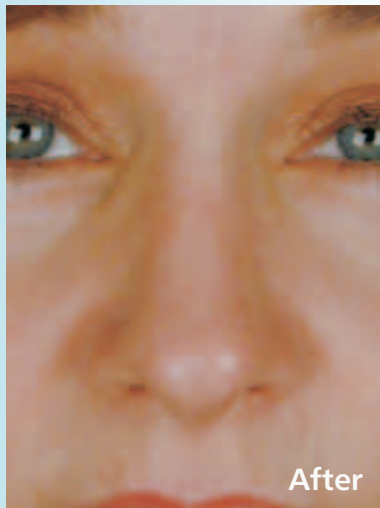
Sedation anesthesia may be administered in varying levels: minimal, moderate, or deep. The anesthesiologist makes the decision about which level of sedation to administer.

Minimal sedation: With this level of sedation, you remain awake but relaxed during your procedure, and you don't feel pain or discomfort. Your memory of the procedure isn't affected.

Moderate sedation: You'll feel drowsy and may sleep through portions of or all of your procedure with moderate sedation. However, you can be awakened if touched or spoken to. You may or may not remember what happens during your procedure.

Deep sedation: You'll sleep through your procedure and most likely won't remember much, if anything, about it. This is often referred to as TIVA—total intravenous anesthesia. A laryngeal mask airway (LMA) may be used with TIVA as a way to keep your airways open during your procedure. The LMA consists of an inflatable silicone mask and a rubber connecting tube.





Local Anesthesia

Local anesthesia numbs a small portion of your body, preventing you from feeling any pain in that area. Local anesthesia, when used alone, leaves you fully alert and allows you to breathe on your own. For rhinoplasty procedures, local anesthetics aren't used alone, but are often combined with sedation anesthesia. Local anesthetics remain in the body for a very short time and don't cause any feelings of sleepiness or grogginess.

General Anesthesia

The deepest form of general anesthesia produces a loss of sensation throughout your entire body and blocks your memory of the procedure. Basically, you won't see, hear, or feel anything during your procedure. Because general anesthesia renders you unconscious, you may or may not be able to breathe on your own. For this reason, the anesthesiologist may place a breathing tube down your windpipe (trachea). General anesthesia agents remain in the body for up to twenty-four hours, so you won't feel like you're back to normal until these agents have been completely eliminated from your system.

Monitoring During Surgery

To ensure your safety, the anesthesia professional will monitor your body's vital functions the entire time that anesthesia is being administered. While the facial plastic surgeon concentrates on making refinements to your nose, the anesthesiologist will focus on equipment that monitors your heart activity, breathing, circulation, and oxygen levels.

EKG: The monitors that were attached to your chest, arms, and back during surgery prep are connected to an EKG (also known as an ECG) machine that monitors your heart activity. The EKG machine alerts the anesthesiologist to any changes in your heartbeat.

Blood pressure cuff: A common blood pressure cuff is used throughout surgery to inform the anesthesiologist of any change in your blood pressure.

Pulse oximeter: The pulse oximeter is clipped to the tip of your finger during surgery prep to monitor the amount of oxygen in your blood. The device is linked to a computerized unit, which sounds an alarm if there's a drop in your oxygen levels.

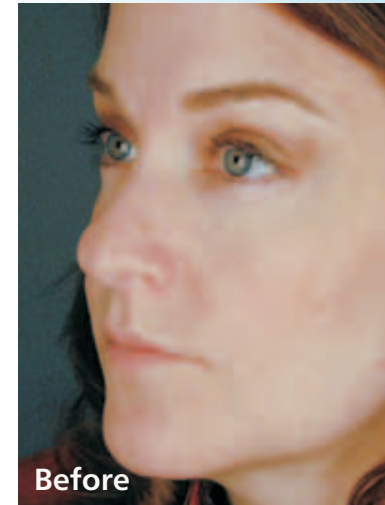
Ventilator monitor: If general anesthesia is used during your procedure, the breathing tube that is placed down your windpipe is connected to a ventilator, or artificial breathing machine. The ventilator breathes for you while you are under the effects of the anesthesia. To ensure that the breathing tube is placed correctly and that your ventilation levels are normal, the anesthesiologist will check the ventilator monitor.

Undergoing Your Rhinoplasty Procedure

If you're having closed rhinoplasty, your procedure will probably last approximately one to two hours. If you're having open rhinoplasty, your procedure will take about two to three hours. More complex cases may take even longer. Once you're sedated, your surgery will begin with the surgeon making small incisions just inside the rim of each nostril. If the open rhinoplasty technique is being used, an additional incision is made on the columella, between the nostrils. This incision may be made in the shape of an inverted V, a W, or a zigzag, which is referred to as a "step off" incision.

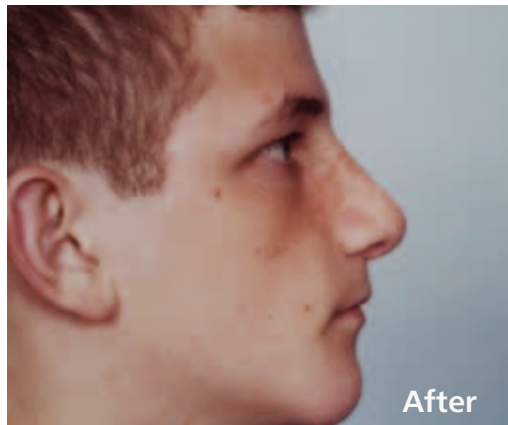
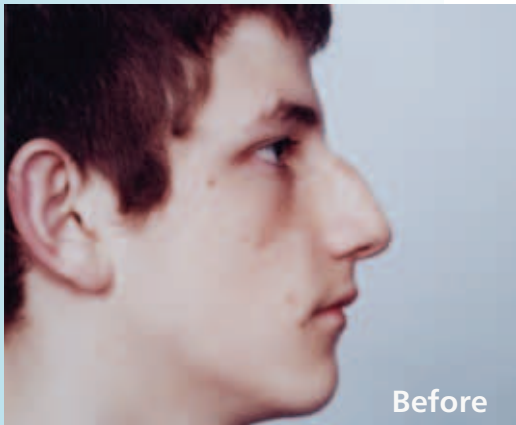
If your surgeon is using the open technique, the skin is lifted away from the underlying nasal structures so that they are clearly visible. In the closed technique, the skin is separated, but not lifted away, from the underlying tissues.

Depending on the characteristics of your nose, your rhinoplasty may involve reshaping one, some, or all of the following: the bridge of your nose, the upper portion of your nose, the cartilage at the tip of your nose, and the nostrils. If it's necessary to improve the function of your





Repair of deformity after nose fracture



nose as well as its appearance, your surgeon may perform additional reshaping of the septum and other tissues within the nose.

It's important to note that each of these steps may be performed using a variety of surgical techniques. The techniques your surgeon chooses depend largely on your anatomy and his or her personal preferences. Likewise, surgeon preference often dictates the order in which the steps of the procedure are performed.

Reshaping the Bridge

Shaping the bridge of the nose may involve reducing or augmenting its size or refining its shape. The bridge of the nose consists of both cartilage and bone. To reduce a hump on the nose, a surgeon will remove excess cartilage and bone and then refine the remaining tissues with a *rasp*, an instrument similar to a nail file. When removing a hump, most surgeons take a conservative approach, removing less cartilage and bone than they think is necessary and then making minute refinements until the desired result is achieved. When a hump is removed, the remaining bone may have what's called an *open-roof deformity*, or a gap between the two sides, that needs to be closed. This is done in a controlled manner by making fine cuts, small

fractures called osteotomies, in the bone. These cuts are made with a small chisel, called an *osteotome*, and a surgical hammer. After the bone is cut, it is gently guided into the desired position. If the bridge of your nose requires only refinement, your surgeon may simply use a rasp to make slight improvements in its shape.

To augment the size of the bridge, a surgeon may be required to add cartilage, soft tissue, or alloplastic material. (See the sections on “Cartilage Grafts”, “Soft-Tissue Grafts”, and “Alloplastic Implants” in this chapter for more information.) Augmenting the bridge of the nose is especially common in certain ethnic rhinoplasty procedures. Added cartilage is generally sutured in place within the nose and then refined.

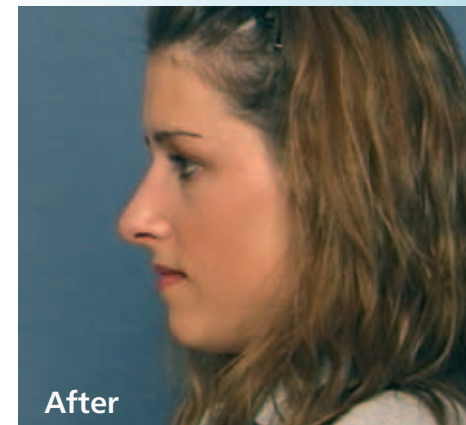
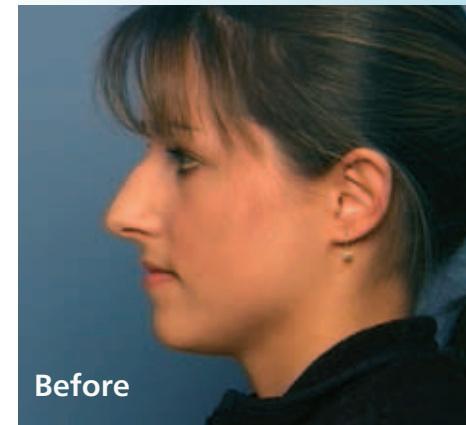
Reshaping the Upper Portion of the Nose

The upper portion of the nose, which is made of bone, is commonly reshaped in rhinoplasty procedures. To narrow the nose, a surgeon must move the bones closer together. If a hump is removed from the bridge of your nose, your nose will most likely require narrowing as well. To correct a crooked nose, the bones must be realigned in a straight fashion. Narrowing and straightening the nose are both accomplished in a controlled manner by making osteotomies in the bone.

Reshaping the Tip of the Nose

The tip of the nose is made of cartilage. Reshaping it may involve reducing its size, refining its shape, augmenting its size, shortening or increasing its projection, shortening or increasing its length, or changing the angle between the tip and the upper lip. To reduce its size, shorten its projection, shorten its length, or raise its angle, your surgeon may remove or refine excess cartilage using a number of surgical techniques. In some instances, sutures may be placed in the cartilage to help achieve the desired effect.

When the tip of the nose is too small and requires augmentation, a cartilage graft, a soft-tissue graft, or a combination of both may be



necessary. In some instances, when the tip of the nose is the only portion of the nose that requires refinement, the procedure is called *tiplasty*.

Cartilage Grafts

If your nose lacks adequate *cartilage* to achieve a satisfactory outcome, a *cartilage graft* may be necessary. When cartilage in the bridge of your nose or in the tip of your nose needs to be built up, your surgeon will most commonly use cartilage from your own septum. Cartilage is also commonly taken from your own ear. In rare instances, cartilage may be harvested from a rib, or it may come from donor tissue.

When taking cartilage from the septum, the surgeon removes a portion of your septum that doesn't affect the overall support of your nose. To take cartilage from your ear, the surgeon will make a well-hidden incision in the back of your ear, and remove a portion of the cartilage within. Removing cartilage from the ear may cause your ear to lie closer to your head, but will have no effect on your hearing. Taking cartilage from a rib requires an incision in the rib cage.

The harvested cartilage is shaped and sutured strategically into your nose to achieve the desired result. When the cartilage comes from your own body, there's no risk of rejection. In the rare instance that the cartilage comes from donor tissue, there is some risk that your body will reject it.

Soft-Tissue Grafts

When augmentation is required in a rhinoplasty procedure, a surgeon may use soft-tissue grafts in lieu of or in addition to cartilage grafts and alloplastic implants. When cartilage grafts are added, there's a possibility that these structures may eventually become visible under the skin, especially if you have thin to medium skin, or if you're having ethnic rhinoplasty or revision rhinoplasty, a follow-up procedure to refine a previous nose surgery. Revision rhinoplasty can cause the skin to thin and to contract more tightly around the underlying structures, creating a "shrink wrap" effect that can make the underlying cartilage grafts visible.

By covering the cartilage grafts with soft tissue, a surgeon can often prevent them from becoming visible.

Soft-tissue can be harvested from the nasal tip or from the deep temporalis fascia, which cover the mastication (chewing) muscles on the side of the skull. When deep temporalis fascia is used, the incisions are hidden within the hairline.

Alloplastic Implants

In some instances, alloplastic implants may be used in addition to or in place of cartilage grafts and soft-tissue grafts. For instance, if you would prefer not to use your own cartilage or soft tissue, your surgeon may use an alloplastic implant instead. These implants are pliable and easy to mold to the desired shape. However, the implants have been noted to have higher infection rates than when your own tissue is used. Alloplastic implants are more commonly used in revision rhinoplasty and ethnic rhinoplasty.

Reshaping the Nostrils

During your rhinoplasty procedure, your surgeon can change the shape or size of your nostrils. If your nostrils are too large or too wide, your surgeon can remove a wedge of tissue where your nostrils join your face. This technique, in which small incisions are made in the natural creases where the nose joins the face, is known as a *Weir excision*. Depending on the shape of the wedge removed, this technique can reduce either the width or the length of your nostrils. The resulting scars from these incisions are usually hidden in the natural creases of the nose and may be invisible or barely visible when fully healed. Another surgical technique used to reduce the size or flare of the nostrils is called *nostril sill incisions*. With this technique, small incisions are made inside the nostrils at the base of the nose. Both of these techniques are called *alar reduction*. In addition to or in place of these techniques, your surgeon may use sutures to narrow flared nostrils.

Questions to Ask Your Surgeon

- Which type of anesthesia will be used during my procedure?
- Do you recommend open or closed rhinoplasty for me?
- How long will my procedure take?
- Do you use nasal packing after surgery?
- How will you alter my nose?
- Will I have functional problems that need correction?



Reshaping the Septum

The septum, the dividing wall between the two sides of your nose, is commonly reshaped during rhinoplasty. For instance, if you have a long nose, the surgeon may remove a portion of the septum near the base of your nose to shorten it.

Correcting a Deviated Septum

There are a number of ways to correct a crooked or deviated septum. Your surgeon may simply remove the portion of the septum that is crooked and blocking the airway. If that isn't the best option, your surgeon may make small cuts or fractures in the septum and realign it to make it straighter. When this procedure is performed alone without any cosmetic reshaping of the nose, it's called *septoplasty*.

Other Functional Improvements

If necessary, your surgeon may make additional functional improvements to other tissues within the nose. These improvements are made using a variety of surgical techniques.

Redraping the Skin

When your surgeon has finished reshaping the structures within your nose, he or she will redrape the skin over the new framework. If your nose has been reduced in size, your skin will contract to fit the size of the new framework. In general, it isn't necessary to remove any skin during rhinoplasty. If cartilage grafts were added, the skin will likely be redraped over soft-tissue grafts to prevent the cartilage from becoming visible in the future.

Closing Incisions

Once the best results possible have been achieved, your surgeon will close the incisions. The incisions inside the nose and across the

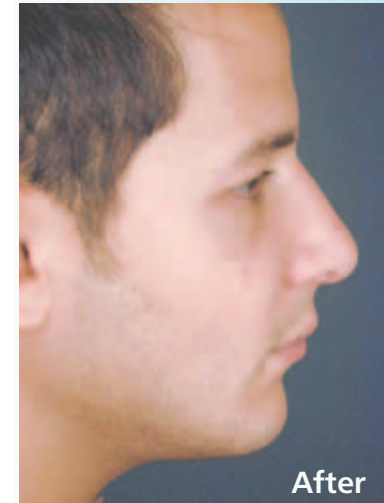
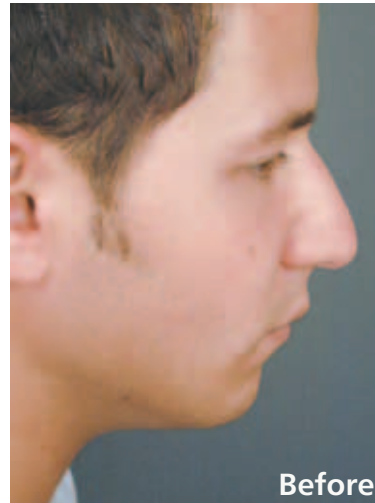
columella are closed using very fine sutures that are about as thick as a single hair. The sutures used in rhinoplasty may be absorbable, nonabsorbable, or a combination of both. Absorbable sutures dissolve on their own and don't require removal in your surgeon's office. Nonabsorbable sutures require removal in your surgeon's office.

Dressings

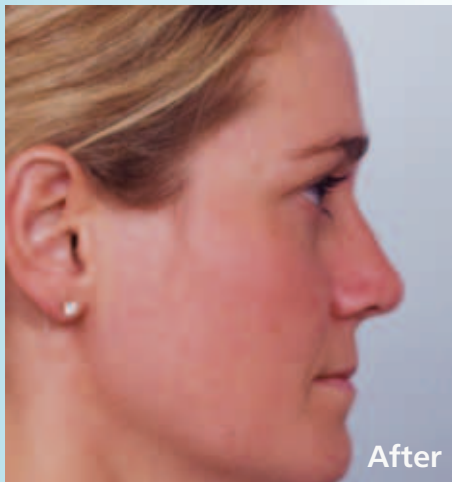
Once your surgery has been completed, dressings will be applied to your nose. Surgical tape is applied tightly to the skin across the bridge and, in some cases, under the base of your nose. The tape serves a dual purpose: it protects the skin and helps reduce swelling.

A small splint is then placed on the bridge of your nose to stabilize the reshaped nasal bones and tissues. Nasal splints come in a variety of materials, including metal and plaster of Paris. The type of splint used is usually a matter of your surgeon's personal preference. For added comfort, the underside of the splint may be lined with soft cloth. The splint may be self-adhering or may be kept in place with additional tape.

Gauze pads are applied below the base of your nose and are taped into place. The gauze pads are used to absorb any postoperative nasal discharge. Cold cloths may be placed on your forehead to reduce swelling.



Rhinoplasty and chin implant



Nasal Packing

In the past, long strips of gauze coated with antibiotic ointment or petroleum jelly were used to pack the nostrils to minimize bleeding and support the nose following surgery. Although this nasal packing used to be commonplace, a growing number of surgeons have stopped using it because it increases discomfort, contributes to added swelling and bruising, and prolongs the recovery period. In addition, while nasal packing is in place, it's impossible to breathe through the nose. Instead of using packing, surgeons now use special surgical techniques to control bleeding and provide nasal support. Some surgeons may insert a small pack of absorbent gauze inside the nostrils which will be removed the following day. It's important to note that even if you don't have any packing in your nostrils, postoperative swelling may make it difficult to breathe through your nose for a few days after your surgery.

Some surgeons may place pliable nasal splints made out of silicone inside the nostrils, especially if the septum was severely deviated. These splints are usually removed in your surgeon's office in approximately one week. Although the splints have tubes attached that allow you to breathe through your nose after surgery, they are usually considered uncomfortable. Most patients prefer not to have anything inside the nostrils following surgery.

Chin Augmentation

If your surgeon has determined that *chin augmentation*, in addition to rhinoplasty, will help you achieve a more balanced profile, it is often performed at the time of your rhinoplasty procedure; the implant procedure is usually performed first and takes about thirty minutes. In this procedure, an incision is made either underneath your chin or inside your mouth where your lower lip meets your gum. The surgeon then inserts the chin implant. Chin implants come in a variety of shapes and sizes and are made of natural-feeling synthetic material, such as solid silicone. Once the implant is in place and the desired chin projection is

achieved, the surgeon closes the incision with fine absorbable or nonabsorbable sutures.

In the Recovery Room

After your rhinoplasty procedure, you'll be taken to the recovery room. During your stay in the recovery room, your vital signs will continue to be monitored closely. You can expect to feel drowsy while you're in the recovery room. This drowsiness will soon dissipate; how long it lasts depends on the type of anesthesia used, your individual response to the anesthesia, and whether you received other medications.

If you're like most patients, you may be worried about feeling pain immediately following your procedure. Rest assured that there is generally little or no pain following rhinoplasty.

Side Effects of Anesthesia

You may experience some side effects as the anesthesia wears off. The degree to which you experience side effects is highly individualized and may depend on the type of anesthesia used. In general, side effects from sedation anesthesia, commonly used for rhinoplasty, are minimal. It's common to feel confused and disoriented. Mild reactions to anesthesia also include nausea, sore throat, and dry mouth. However, thanks to anti-nausea medications, the risk of nausea and vomiting following surgery is very low.

Allergic reactions to anesthesia are rare and are usually preventable. By informing your surgeon and anesthesiologist of all known allergies, you can help prevent an allergic reaction. Based on the information you give them, your surgeon and anesthesiologist will select the anesthesia drugs least likely to produce a reaction.

Leaving the Surgical Facility

You'll continue resting in the recovery room until the staff decides that it's safe for your caregiver to drive you home. Most rhinoplasty patients are ready to go home within a few hours after surgery.



Rhinoplasty with chin implant and liposuction to neck and jowls



CHAPTER SIX

After Your Rhinoplasty Procedure

6

After Your Rhinoplasty Procedure

*Y*our rhinoplasty procedure is over. With each passing day, you'll feel more energetic, and the delicate tissues in your nose are healing. Although you'll be able to notice improvement in the shape of your nose right away, you won't see the final results for up to twelve months. By taking proper care of yourself and your nose during the all-important healing phase, you're assured of attaining the best results possible.

Recovery at Home

Once you leave the surgical facility, you'll begin your recovery at home or at an aftercare facility. If you've prepared well, your recovery can be relatively stress-free and comfortable. Recovery time is highly individualized, but most rhinoplasty patients feel well enough to resume many normal activities and return to work or school in one to two weeks.

Postoperative Instructions

To ensure proper healing, your surgeon will provide you with detailed postoperative instructions, which you're expected to follow

closely. The instructions are designed to help minimize pain, swelling, and discomfort during the recovery phase. Make sure your caregiver has a copy of the instructions.

Caring for Your Nose

The gist of postoperative instructions is to protect your nose while it heals. Avoid touching, bumping, or rubbing it, and minimize smiling because it causes movement in your nose. In addition, you need to avoid sniffing and blowing your nose for at least ten days. What if you have to sneeze after surgery? It's difficult to stifle a sneeze, so to protect your nose, express the sneeze through your mouth, and don't try to muffle it.

What about cleaning your nose? You'll be instructed on how to gently clean the exterior of your nose as well as the interior, just inside the nostrils where the incision are. You may also be advised to use a saline spray to help keep the inside of your nose clean.

Sleeping on Your Back

It's important to sleep on your back for a few weeks following surgery to prevent pressure on your healing nose. Sleeping on your side with your nose pressed against a pillow could push the healing structures out of shape. You may want to sleep in a recliner to ensure that you stay on your back.

Minimizing Swelling and Bruising

To minimize swelling, you will likely be instructed to keep your head elevated while you sleep. Most surgeons will also advise you to avoid bending over or lifting anything heavy for at least two weeks following surgery because these activities can aggravate swelling and can also raise your blood pressure and cause bleeding. Your surgeon may also prescribe steroids to help reduce swelling. Your surgeon may suggest using ice, frozen peas, or cold compresses to help reduce bruising around the eyes.

Resuming Activities

Your surgeon will give you a timetable for resuming rigorous activities. No doubt, this list will include instructions to avoid all contact sports and strenuous exercises for four to six weeks. Don't lift any objects that weigh a few pounds. Be cautious with small children and pets that may bump your nose. If you participate in any activities that don't appear on your surgeon's timetable, be sure to ask when it's okay to resume them.

Food, and Drink

Following rhinoplasty, a soft diet is recommended. It's best to avoid chewing gum as well as foods that are hard to chew because they cause too much facial movement. As for beverages, it's important to avoid alcohol because it thins the blood and can lead to bleeding. Avoid drinking any beverages that contain caffeine.

Avoid Wearing Glasses

To help your healing nose maintain its shape, you won't be able to wear eyeglasses or sunglasses on the bridge of your nose for approximately four weeks. Your surgeon will provide you with alternative ways to wear glasses, such as taping them to your forehead or having them refitted so they rest more on your ears rather than on your nose.

Pain Management

The level of pain patients experience after rhinoplasty varies; however, most patients experience only mild discomfort. Many rhinoplasty patients do not need any postsurgical pain relief, but those who do often find over-the-counter pain relievers to be adequate. In some cases, prescription pain medication may be necessary.

The pain relievers your doctor recommends may include opioid and non-opioid medications.

Opioid Medications

You must have a prescription from your surgeon to acquire opioid pain relievers, which are also called narcotics or opiates. *Opioids* are effective in controlling moderate to severe pain and are usually prescribed to help you remain pain-free during the first few days following rhinoplasty. Commonly prescribed opioids include Tylenol with codeine, Darvocet, and Vicodin. These drugs are safe when taken as directed so it's important to follow your doctor's instructions. Because opioids can cause constipation, your surgeon may also recommend an over-the-counter stool softener.

Non-Opioid Medications

Some *non-opioid medications* require a prescription from your surgeon, but many don't. These drugs are non-narcotic and are intended to control mild to moderate pain. Non-opioids include acetaminophen, which is found in Tylenol and Extra-Strength Tylenol, and are often recommended for pain relief following surgery. Remember that many over-the-counter pain relievers contain aspirin, ibuprofen, or naproxen sodium, all of which are discouraged following surgery because they can thin the blood and increase bleeding. Be sure to take only the pain relievers your surgeon has recommended. It's important to take these medications as recommended because exceeding recommended dosages may harm the liver and/or kidneys.

Side Effects of Rhinoplasty

Following your procedure, you will experience side effects commonly associated with rhinoplasty. These side effects are considered normal and are usually temporary.

- *Swelling:* Expect swelling of your nose and the surrounding tissues to peak approximately thirty-six to forty-eight hours after surgery. You can expect more pronounced swelling if osteotomies (cuts or fractures to the nasal bones) were made





during your procedure. Swelling is usually greatest when you rise in the morning. This side effect begins to subside within the first two weeks but will take at least a year to disappear completely.

- *Bruising:* Bruising may occur between the eyes and on the cheeks, especially if you've had osteotomies performed. Bruising peaks approximately two days after surgery and then disappears, usually within two weeks.
- *Pain:* The pain associated with rhinoplasty is usually mild. Most of the pain will probably disappear by the second or third day after surgery.
- *Nasal blockage:* Congestion is to be expected following nasal surgery and may feel similar to the effects of a head cold. Cold-like symptoms are common for about six weeks after surgery.
- *Drainage:* Following surgery, you can expect some nasal drainage to be tinged with blood, especially during the first day or two. You may notice an increase in nasal drainage when you rise to an upright position after being in a reclining position. This is normal and is not a cause for concern.
- *Stiffness in upper lip:* Your upper lip may feel stiff, making it more difficult to smile. This feeling will usually dissipate within a few weeks.
- *Numbness of tip:* The tip of your nose may feel numb, but the numbness usually disappears within a few months.
- *Depression:* Don't be surprised if you discover that you feel a little blue in the days following your surgery. This is a common occurrence following surgery, when bruising and swelling are at their worst. This emotional letdown may be due to the fact that your face temporarily looks worse than it did prior to surgery, but it may also be attributable to stress, fatigue, or metabolic changes in your body. Rest assured that these feelings usually disappear within a few days.

Potential Complications of Rhinoplasty

There are risks associated with surgery of any kind, including rhinoplasty. However, you should know that when your procedure is performed by a

qualified facial plastic surgeon, complications are uncommon. In the rare instance that you experience a complication, you may require some form of treatment.

- *Infection*: Infection is a risk associated with any kind of surgery, but it is rare following rhinoplasty. Antibiotics are routinely prescribed to prevent infection.
- *Bleeding*: Excessive postoperative bleeding can occur.
- *Burst blood vessels*: Small burst blood vessels may appear as tiny red dots on the surface of the skin on your nose. This is more common if you have rosacea, or if you're having revision rhinoplasty. Although it may be permanent, it can be treated with vascular lasers.
- *Scarring*: If an incision is made on your columella, or if incisions are made to reduce the width or length of your nostrils, there is a minimal risk of obvious scarring.
- *Irregularities under the skin*: It's possible for irregularities under the skin to be visible. Any underlying irregularities are more visible if you have thin skin.
- *Asymmetry*: This may occur due to no fault of your surgeon. Post-operative scarring within the nose can cause it to appear uneven from one side to the other. In addition, the nose is a three-dimensional object that can heal in unpredictable ways.

When to Call Your Surgeon

As you recover from rhinoplasty, you may wonder if you should call your surgeon about certain symptoms you experience. As a rule, you don't need to call your surgeon if you're experiencing symptoms associated with common side effects. However, if you experience any of the following, you should contact your surgeon's office.

- Any injury to your nose

Questions to Ask Your Surgeon

- How should I care for my nose during the recovery period?
- When can I resume light activities? Strenuous activities?
- When can I return to work?
- Which pain medications do you recommend?
- What are the side effects and risks associated with rhinoplasty?
- What will happen at my follow-up appointments?
- What is your policy on revision rhinoplasty?

- Nasal drainage that becomes excessively bloody and flows profusely
- A rise in temperature to over 100.5 degrees (38C), which can indicate infection
- Sudden swelling or discoloration
- Excessive pain that isn't controlled by medication
- Any reaction to the prescribed medications you're taking

Follow-up Appointments

After your rhinoplasty procedure, you'll need to return to your surgeon's office for several follow-up appointments.

If packing was used in your procedure, it's usually removed within a few days, and often the day after your surgery. Even if packing isn't used in your procedure, you may be asked to return for a follow-up visit within a few days so your surgeon can evaluate how you're healing and so that the inside of your nose can be cleaned. Cleaning the inside of your nose is usually done gently with Q-tips swabs and half-strength hydrogen peroxide.

The splint placed on your nose and any nonabsorbable sutures are generally removed in your surgeon's office at one week. Removal of the sutures and splint isn't painful and usually takes only a few moments. Once the splint is removed, you'll have a chance to observe the new shape of your nose. However, it's important to remember that your nose will still be swollen at this time, so you won't be looking at your final results.

During this appointment, your surgeon may also retape your nose to control swelling. You may also receive instructions on how to perform simple nasal exercises along any osteotomy sites to decrease swelling or to mold the nasal bones. In follow-up appointments, you may also be instructed to continue taping your nose nightly for four to six weeks to further minimize swelling. The frequency of additional follow-up appoint-

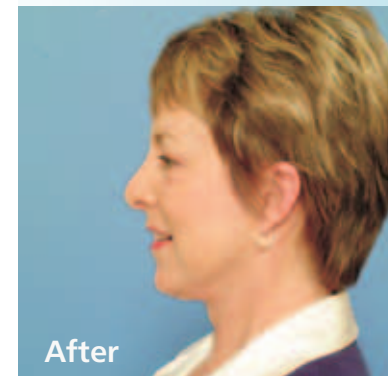
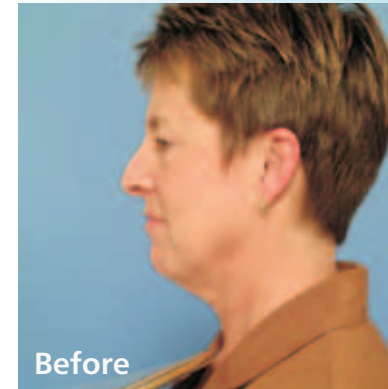
ments depends on your surgeon. Considering that these appointments help to ensure that the healing of your nose is on track, and are generally included in the price of your surgery, it's important to go to all postoperative visits.

Getting Back to Normal

As the weeks and months pass after your surgery, your life will return to normal. Be sure to follow your surgeon's timetable for returning to work or school and for resuming various activities. This will help protect your nose from injury and will allow it to heal as quickly as possible.

How Long Does Rhinoplasty Last?

You should be aware that your nose may change throughout your lifetime due to aging. This is normal and occurs whether you've had rhinoplasty or not. The good news is that once your nose has completely healed, it doesn't require any long-term follow-up care. However, it is recommended that you visit your surgeon annually to have photos taken of your nose. This way, you and your surgeon can track the changes to your nose.



Rhinoplasty with facelift and brow lift



CHAPTER SEVEN

Revision Rhinoplasty

7

Revision Rhinoplasty

What if your rhinoplasty didn't turn out the way you hoped it would? What if your nose looks great initially but subsequently changes in ways you don't expect or don't like? Or what if you aren't able to breathe as easily following the surgery? Perhaps your surgeon will tell you he or she can refine your initial result with an additional procedure, called a *revision rhinoplasty*. With any cosmetic surgery, a touch-up or revision procedure is sometimes necessary. Even in the hands of the best surgeon, the need for revision sometimes occurs. And because rhinoplasty is a complex operation, it has a higher revision rate than other cosmetic procedures.

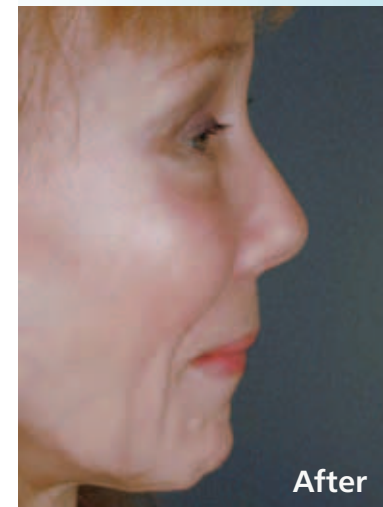
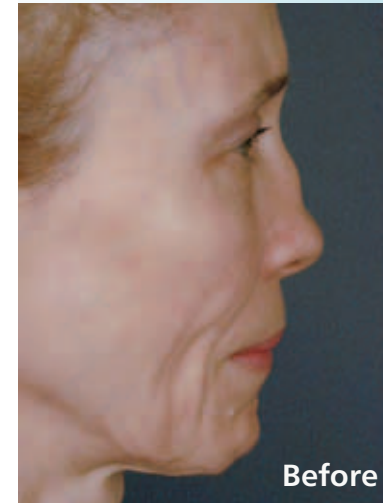
Common Reasons for Revision Rhinoplasty

The reasons why you may choose to have revision rhinoplasty fall into one of two categories: dissatisfaction with the way your nose looks or dissatisfaction with the way your nose functions, and breathing is affected.

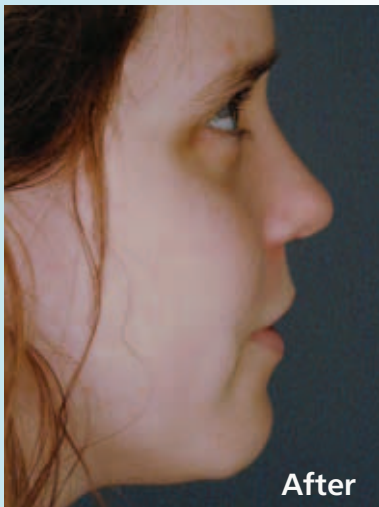
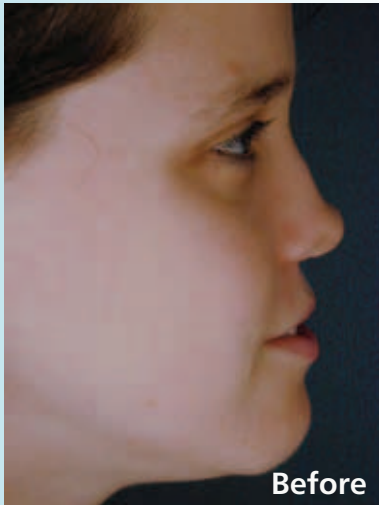
If you are displeased with the way your nose looks, you may feel that the changes to your nose are too dramatic or perhaps too subtle. Or you may be happy with your initial results but may experience subse-

quent changes that alter the shape of your nose in a way you don't like. There are other common reasons why one might seek revision rhinoplasty.

- *Asymmetry*: This may occur due to no fault of your surgeon. Post-operative scarring within the nose can cause it to appear uneven from one side to the other. The nose is a three-dimensional object that can heal in unpredictable ways.
- *Callous or bump*: A small callous or bump may appear on the dorsum up to one year following your procedure. The cause of this is unknown, but if it occurs, it can usually be removed in a minor procedure.
- *Polly beak*: Sometimes called a “parrot beak,” this can occur when a hump on the bridge of the nose isn't sufficiently reduced in the area just behind the tip or when there's a build-up of scar tissue. Correction requires revision rhinoplasty.
- *Pinched tip*: When the tip of the nose appears pinched, it's often because too much tip cartilage was removed or the cartilage didn't heal well and collapsed. To correct this, cartilage is usually added to the nasal tip in a revision rhinoplasty procedure.
- *Inverted V*: When a hump is reduced, sometimes the middle vault of the nose collapses inward, causing an “inverted V” appearance. This may be corrected with the placement of grafts in a revision rhinoplasty procedure.
- *Post-operative changes*: In general, following primary rhinoplasty, the nose changes every year. These changes can be unpredictable, and you may not like the way these changes look.
- *Disappointment with results*: Despite your surgeon's best efforts, it's possible that you may be disappointed with your results. Disappointment may be due to unrealistic expectations on your part, unclear communication of your goals, surgical aesthetic misjudgment, or complications during the healing process.



Revision of previous rhinoplasty



Revision of previous rhinoplasty

Even if you're completely satisfied with the way your nose looks following surgery, it is possible to experience a nasal obstruction that make it more difficult to breathe through your nose. Most nasal obstructions can be corrected with revision rhinoplasty. If your breathing is hindered in any way, you may want to consult with your surgeon about a follow-up procedure to alleviate the problem.

Paying for Revision Rhinoplasty

Who pays for revision rhinoplasty? It depends. Revisional procedures performed to correct functional problems may be covered by insurance. Follow-up procedures performed solely for cosmetic purposes typically aren't covered by insurance. However, that doesn't necessarily mean that you'll be responsible for the entire bill. In some cases, if you return to your original surgeon for a minor touch-up, you may pay for only a portion of the procedure. For instance, if you have a healing complication, your surgeon's fee may be waived, but you may still be responsible for paying fees for the operating room and anesthesia. However, if you're dissatisfied with your nose, and didn't communicate your wishes clearly, you may be responsible for all revision surgery fees. If you decide to go to a different surgeon for revision rhinoplasty, you will be responsible for all charges. It's a good idea to ask in advance about your surgeon's revision policies.

Revision Timeline

No matter what your reasons are for wanting further refinements to your nose, you'll need to wait an average of one year following your initial procedure. Why? It's important to wait until all the swelling from your first surgery has subsided, especially if you think your reshaped nose is too big. Once your surgeon indicates that the swelling has completely subsided (usually after one year has passed), the decision of when to have revision rhinoplasty is up to you. You can wait for a few

more months or even wait a few years. In fact, revision rhinoplasty can be performed decades after your original procedure.

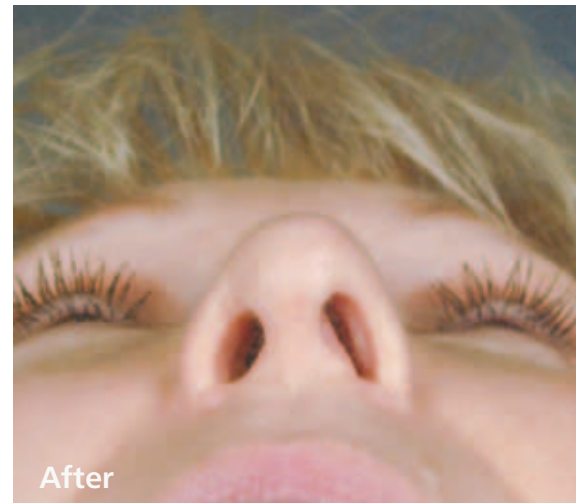
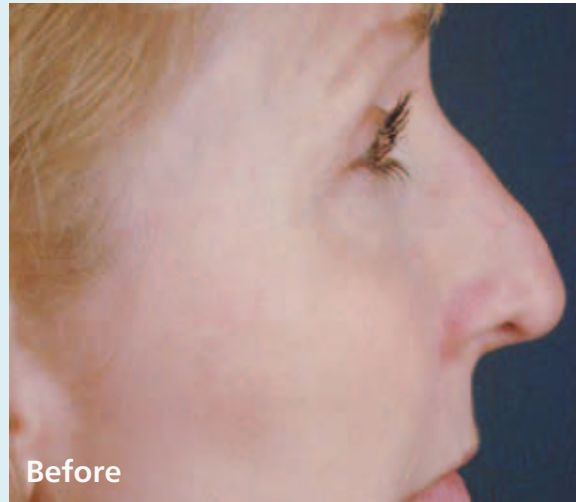
Special Considerations About Revision Rhinoplasty

As mentioned earlier, rhinoplasty is a complex cosmetic surgical procedure, and revision rhinoplasty is even more challenging. Scar tissue builds up within the nose following surgery, making it more difficult to sculpt the underlying structures. In addition, an inexperienced surgeon may have removed too much cartilage or bone, making grafts a necessity in a follow-up procedure. Also, the nasal skin becomes thinner with revision surgery and tends to contract more tightly around the underlying structures, creating a “shrink wrap” effect. To avoid having the underlying structures become visible under the skin, soft-tissue grafts are often necessary.

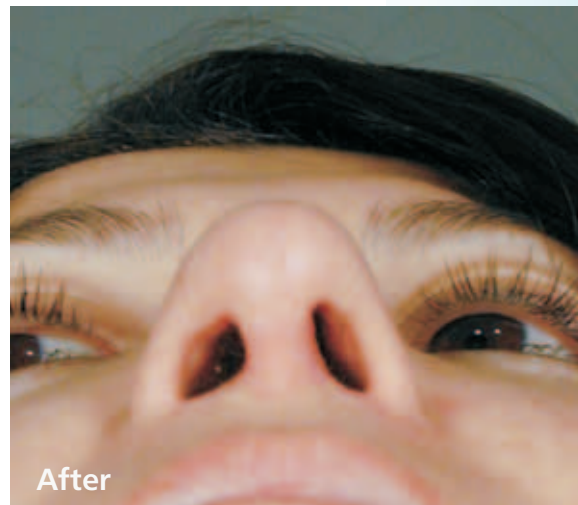
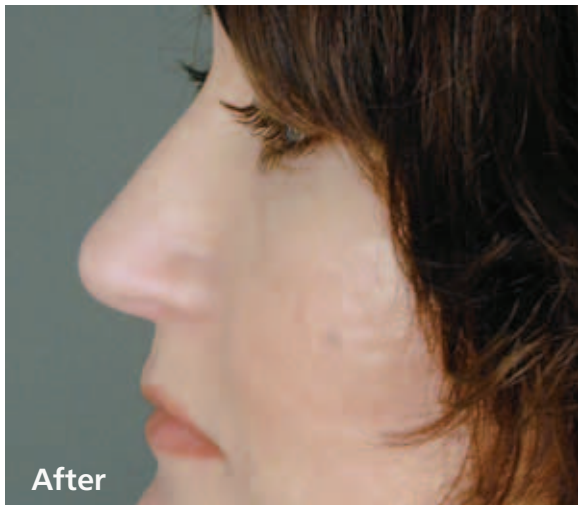
Choosing a Surgeon for Revision Rhinoplasty

If you aren't satisfied with the results of your initial procedure, you can either return to the same surgeon for a touch-up procedure or seek out a surgeon who specializes in revision rhinoplasty. First, it's important to remember that problems can occur even in the hands of the most experienced surgeons. If you did your homework when choosing your original surgeon, and you know that he or she was qualified and competent, you may wish to have your original surgeon perform the follow-up procedure. In most cases, if you require only a small touch-up, you may feel comfortable having your original surgeon perform the procedure.

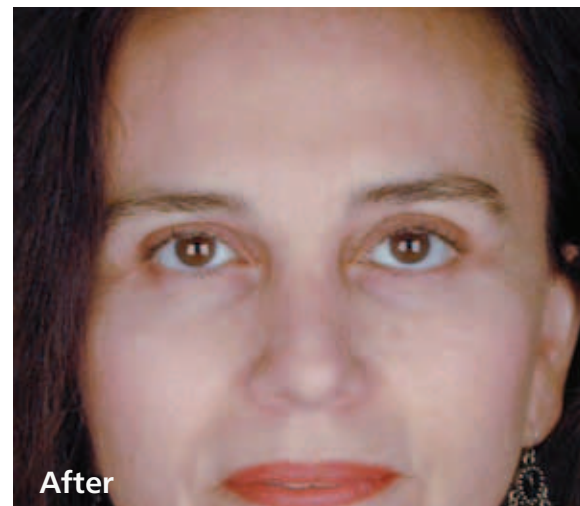
In some cases, however, you may wish to seek out a surgeon who specializes in revision rhinoplasty. For instance, if you feel that your surgeon lacked the necessary experience to produce a satisfactory result, if you require major refinements, or if your original surgeon doesn't have experience with follow-up procedures, it may be best to find a specialist. When looking for a surgeon to perform your follow-up procedure, be



Revision rhinoplasty. Tip reconstructed and dorsal "hump" softened



Revision of previous rhinoplasty



Revision of previous rhinoplasty

sure to ask if he or she performs revision rhinoplasty on a regular basis and insist on reviewing before-and-after photos of patients who have undergone revisional procedures.

Your Revision Rhinoplasty Procedure

Your revision rhinoplasty procedure can be performed in a surgeon's office-based facility, in a hospital, or in an outpatient surgical facility. Because of the additional challenges, a revision rhinoplasty procedure may take longer than an initial rhinoplasty procedure. If you're having an extensive follow-up procedure, you can count on being in the operating room for approximately three to four hours. However, if you're only having a minor touch-up, your procedure will take about one to two hours. The procedure is most often performed either with a combination of local anesthetics and sedation or with general anesthesia. In most cases, revisions are performed using open rhinoplasty, although closed rhinoplasty may be suitable in some instances.

Some revision rhinoplasty procedures require cartilage grafts or soft-tissue grafts as discussed in Chapter 5. Likewise, alloplastic implants, also discussed in Chapter 5, may be necessary.

Recovering from Revision Rhinoplasty

You can expect your recovery from revision rhinoplasty to take somewhat longer than your recovery from your primary procedure. The amount of time it takes for your nose to heal also depends on whether you've had a minor touch-up or a major revision. Major revisions tend to take at least a year to heal.

Following revision rhinoplasty, you may experience some discomfort, but this can usually be alleviated with pain medication. Your surgeon will also provide you with instructions to help reduce swelling and to make you more comfortable while you heal at home or at an aftercare facility. As with any surgical procedure, healing is highly individualized, however, most patients who have a minor touch-up feel well enough to resume work and normal activities within a week. Most patients who have extensive revision require about two weeks to resume work and normal activities. Your surgeon will likely advise you

Questions to Ask Your Surgeon

- Do you perform revision rhinoplasty on a regular basis? How many per year?
- Will you use the open or closed technique for my procedure?
- Can revision rhinoplasty improve the function of my nose?
- Are my goals achievable with revision rhinoplasty?
- Are there any complications or side effects I should be aware of?
- When will I see my final results?
- Will you be using any grafts? If so, where will the grafts come from??



Revision of previous rhinoplasty

to avoid exercise—such as weight lifting, running, cycling, or other aerobics—for at least four weeks. Avoid all contact sports for at least six weeks.

Side Effects and Complications

You should be aware that in addition to the side effects and complications associated with primary rhinoplasty, certain side effects and complications are increased with revision rhinoplasty, including:

- excessive scarring
- prolonged swelling
- small burst blood vessels

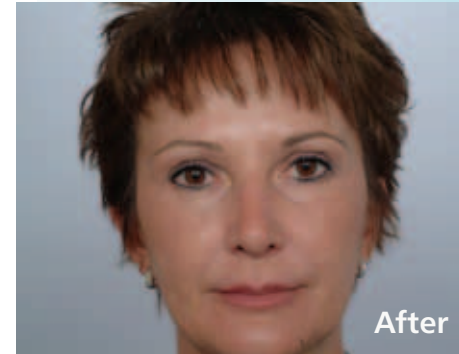
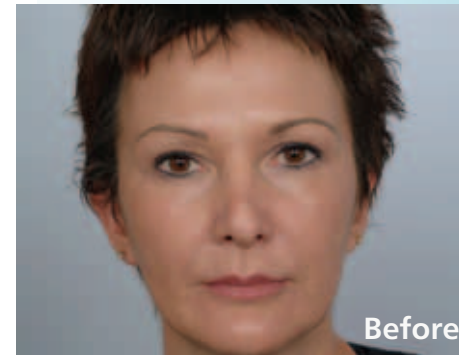
Follow-up Appointments

After your revision rhinoplasty, you can expect to have several follow-up appointments with your surgeon. Typically, you'll be asked to visit your surgeon's office the day after your procedure and perhaps the next day as well. If nasal packing was used, it will be removed at one of these visits. You may be asked to return for three or four more visits within the first few weeks after surgery. Usually about one week after your surgery, your surgeon will remove any splints placed on your nose and will remove any nonabsorbable stitches. After these initial visits, your surgeon may want to see you on a monthly basis and then on a quarterly basis during the first year after your procedure. After that, you may be asked to return on a yearly basis.

Your Final Results

Following revision rhinoplasty, it may take a year or longer before you see your final results. However, you can expect to see positive results long before a year has passed. In fact, swelling should begin to subside after two weeks and will continue to improve each week or month. You can expect about 70 percent of the swelling to have faded

within three months after the procedure. And although it may take a year or longer for the rest of the swelling to subside, it usually isn't noticeable to anyone but your surgeon and yourself.



Revision, with tip grafting, of previous rhinoplasty

In Closing

We hope that the information presented in this book has provided you with a better understanding of rhinoplasty and the results it can produce. We hope that we have adequately stressed the importance of choosing a qualified surgeon to perform your rhinoplasty.

If you're hoping to achieve a more aesthetically pleasing appearance and to improve your self-confidence with rhinoplasty, we encourage you to make an appointment with a qualified cosmetic surgeon. With the surgeon's guidance, you can determine the ways in which your nose can be improved so that you can look better and feel better about yourself.

Resources

American Academy of Facial Plastic and Reconstructive Surgery

310 South Henry Street
Alexandria, VA 22314
Phone: 703-299-9291 or 800-332-FACE
Fax: 703-299-8898
www.facial-plastic-surgery.org

Founded in 1964, the American Academy of Facial Plastic and Reconstructive Surgery (AAFPRS) represents more than 2,700 facial plastic and reconstructive surgeons throughout the world. Among the objectives listed in its mission statement is to promote the highest-quality facial plastic surgery through education, dissemination of professional information, and the establishment of professional standards. The AAFPRS is a National Medical Specialty Society of the American Medical Association. AAFPRS members are board-certified surgeons whose focus is surgery of the face, head, and neck. The AAFPRS website offers a “virtual exam”—an interactive feature that highlights the most common areas in which facial cosmetic procedures are performed. The online Patient Information Series explains procedures, helps you determine whether they’re right for you, and lets you know what to expect. Also on

the site are FAQs, before-and-after photos, a physician finder, and a quarterly online magazine.

American Society for Aesthetic Plastic Surgery

11081 Winners Circle
Los Alamitos, CA 90720
Phone: 888-ASAPS-11 (physician referrals)
www.surgery.org

Founded in 1967, the American Society for Aesthetic Plastic Surgery (ASAPS) is a professional organization of plastic surgeons, certified by the American Board of Plastic Surgery, who specialize in cosmetic plastic surgery. The organization has 2,100 members in the United States and Canada, as well as corresponding members in many other countries. The website offers an “Ask an ASAPS Surgeon” feature, as well as news, updates, and consumer-oriented reports on surgical and non-surgical procedures. The site also has a “find-a-surgeon” feature. You’ll also find numerous articles and procedure descriptions, some in both English and Spanish.

The American Board of Facial Plastic and Reconstructive Surgery

115C South St. Asaph Street
Alexandria, Virginia 22314
Phone: 703-549-3223
Fax: 703-549-3357
www.abfprs.org

This organization's mission is improving the quality of facial plastic surgery available to the public by measuring the qualifications of candidate surgeons against certain rigorous standards. To be considered for membership, a physician must have completed a residency program and have been in practice a minimum of two years, have, one hundred operative reports accepted by a peer-review committee, successfully pass an 8-hour written and oral examination, and hold the appropriate licensure and adhere to the ABFPRS Code of Ethics.

American Board of Medical Specialties

1007 Church Street, Suite 404
Evanston, IL 60201-5913
Phone: 847-491-9091
Fax: 847-328-3596
www.abms.org

The American Board of Medical Specialties (ABMS) is an organization of twenty-four approved medical specialty boards. The intent of the certification of physicians is to provide assurance to the public that those certified by an ABMS Member Board have successfully

completed an approved training program and an evaluation process assessing their ability to provide quality patient care in the specialty. This Web site explains how specialists are trained and certified; it also offers a search feature for finding certified physicians.

American Board of Otolaryngology

5615 Kirby Drive, Suite 600
Houston, TX 77005
Phone: 713-850-0399
Fax: 713-850-1104
www.aboto.org

Founded in 1924, the American Board of Otolaryngology maintains high standards in the field by promoting and certifying the education and examination of ear, nose, and throat physicians. The organization offers subspecialty certificates, including a certificate in plastic surgery of the head and neck. The board's website verifies physician certification but doesn't offer referrals. The organization also publishes patient education brochures made available in the offices of its diplomates.

Canadian Academy of Facial Plastic and Reconstructive Surgery

600 University Avenue, Suite 401
Mount Sinai Hospital
Toronto, Ontario, M5G 1X5
Canada

Phone: 905-569-6965 or 800-545-8864
www.facialcosmeticsurgery.org

This organization is an international nonprofit medical society incorporated under the federal laws of Canada. Members are specialists certified by the Royal College of Physicians and Surgeons of Canada or its equivalent and have met high standards of training and experience in cosmetic and plastic surgery of the face and neck.

American Society of Plastic Surgeons

444 East Algonquin Road
Arlington Heights, IL 60005
Phone: 847-228-9900 or 888-4-PLASTIC
(888-475-2784) (physician referrals)
www.plasticsurgery.org

The American Society of Plastic Surgeons (ASPS) is the largest plastic surgery specialty organization in the world. Founded in 1931, the society is composed of board-certified plastic surgeons who perform cosmetic and reconstructive surgery. The mission of the ASPS is to advance quality care to plastic surgery patients by encouraging high standards of training, ethics, physician practice, and research in plastic surgery. The society advocates for patient safety. For example, it encourages its members to operate in surgical facilities that have passed rigorous external review of equipment and staffing. The society works in concert with the Plastic Surgery Educational Foundation, founded in 1948, which supports research and educational programs for

plastic surgeons. On the society's website are FAQs, a history of plastic surgery, a surgeon finder, capsule descriptions of procedures, patient profiles, a photo gallery, and cost information.

American Board of Plastic Surgery

7 Penn Center, Suite 400
1635 Market Street
Philadelphia, PA 19103-2204
Phone: 215-587-9322
Fax: 215-587-9622
www.abplsurg.org

The mission of the American Board of Plastic Surgery is to promote safe, ethical, and efficacious plastic surgery to the public by maintaining high standards for the education, examination, and certification of plastic surgeons as specialists and subspecialists. Primarily for physicians, the board's website includes FAQs explaining how doctors become board-certified and describing differences among licensure, certification, and accreditation.

Joint Commission on Accreditation of Healthcare Organizations

One Renaissance Blvd.
Oakbrook Terrace, IL 60181
Phone: 630-792-5000
www.jointcommission.org

The mission of this commission is to continuously improve the safety and quality of care provided to the public through the provision of health care accreditation and related services that support performance improvement in health care organizations. The commission evaluates and accredits nearly 15,000 health care organizations and programs in the United States. An independent, not-for-profit organization, the Joint Commission is the nation's predominant standards-setting and accrediting body in health care.

Accreditation Association for Ambulatory Health Care

3201 Old Glenview Road, Suite 300
Wilmette, IL 60091
Phone: 847-853-6060
www.aaahc.org

Formed in 1979, the Accreditation Association for Ambulatory Health Care (AAAHC), also known as the Accreditation Association, develops standards to advance patient safety, quality, and value through peer-based accreditation processes, education, and research. The peer-based program currently accredits more than 2,300 ambulatory-health-care organizations.

Accreditation is on a voluntary basis, and organizations are evaluated based on nationally recognized standards developed by the AAAHC. The AAAHC's Web site allows you to search for

accredited organizations and explains what accreditation means to you as a patient.

American Association for the Accreditation of Ambulatory Surgery Facilities, Inc.

5101 Washington Street, Suite 2F
Gurnee, IL 60031
Phone: 888-545-5222
www.aaaasf.org

Established in 1980, the American Association for the Accreditation of Ambulatory Surgery Facilities, Inc. (AAAASF) has developed an accrediting program to help provide patients with the assurance of safety and quality for their outpatient-surgery experience. To earn accreditation, surgery facilities must meet stringent national standards for equipment, operating-room safety, personnel, and surgeon credentials. The organization has developed a means of measuring medical and surgical competence as well as ethical conduct. The not-for-profit AAAASF has accredited more than one thousand outpatient surgical facilities. The AAAASF Web site allows you to search for accredited surgical facilities and explains the safety and quality standards that must be met.

Canadian Association of Accreditation of Ambulatory Surgery Facilities

2334 Heska Rd.
Pickering, ON CA L1V 2P9
Phone: 905-831-5804
<http://www.caaasf.org>

The Canadian Association for Accreditation of Ambulatory Surgical Facilities (CAAASF) is a national organization formed in 1990 to ensure that surgical procedures done outside a public hospital are performed safely and carefully. It is a voluntary organization of doctors. Member facilities have chosen to be inspected by their colleagues because they want their patients to have the assurance of a safe alternative to in-hospital surgery.

U.S. National Library of Medicine

8600 Rockville Pike
Bethesda, MD 20894

www.nlm.nih.gov or
www.nlm.nih.gov/medlineplus

The National Library of Medicine website indexes articles (primarily for scientists and health professionals) from more than 3,500 medical journals. MedlinePlus is consumer-oriented and includes information on more than 650 topics (conditions, diseases, and wellness), drug information, a medical encyclopedia and dictionary, news, provider directories, and other resources.

Glossary

- anesthesia:** any one of a number of methods used to induce relaxation and either drowsiness or a deep sleep in a patient during surgery to eliminate pain
- bone graft:** a procedure in which bone is surgically removed from one area of the body and implanted in another part (such as the nose) to achieve the desired results
- cartilage:** a translucent, somewhat elastic tissue found in the ear, the nose, and some joints of the human body
- cartilage graft:** a procedure in which cartilage is surgically removed from one area of the body and implanted in another (such as the nose) to achieve the desired results
- chin augmentation:** a procedure in which the projection of the chin is surgically increased to create a more balanced profile
- chin implant:** a natural-feeling synthetic piece used in chin augmentation
- closed rhinoplasty:** rhinoplasty that is performed by making all the incisions within the nose
- columella:** the strip of tissue at the base of the nose that divides the nose into two sides
- complete blood count (CBC):** a blood test that measures the levels of thirteen items in the blood
- deviated septum:** a septum that is crooked and possibly blocking the nasal airway
- dorsum:** the region of nose between the tip and forehead
- electrocardiogram (EKG or ECG):** a procedure used for detecting abnormal heartbeats
- monitored anesthesia care (MAC):** see sedation
- necrosis:** tissue death usually due to a loss of circulation
- non-opioid:** non-narcotic medication
- open rhinoplasty:** rhinoplasty that is performed using an external incision on the columella in addition to incisions within the nose
- opioid:** narcotic medication
- osteotome:** a surgical instrument used to produce cuts or small fractures to the bones during rhinoplasty
- osteotomies:** cuts or small fractures made to the bone during rhinoplasty
- otolaryngology:** a medical specialty focusing on the ear, nose, and throat
- rasp:** a surgical instrument similar to a nail file that is used to reduce the size of bone and cartilage within the nose
- rhinoplasty:** the medical term for nose reshaping surgery
- sedation:** a technique in which an anesthesiologist administers sedatives to induce relaxation and to minimize pain during a surgical procedure while continuously monitoring the patient's vital signs; also called twilight sedation or monitored anesthesia care (MAC)
- septoplasty:** surgical repair of the septum to improve breathing function
- septum:** the dividing wall within the nose
- tiplasty:** a procedure in which the tip is the only portion of the nose reshaped in a rhinoplasty procedure
- cosmetic surgery**
- twilight sedation:** see sedation
- Weir excision:** a procedure in which small wedges of the nostrils are removed by making incisions where the nostrils join the face

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About the Authors

“*That which is truly beautiful is not on the surface. True beauty comes from within and radiates outward. If that is lacking, all that we can create with all our skills as facial plastic surgeons is that which is merely pretty.*”



William Truswell, M.D.

William Truswell, M.D., F.A.C.S., is a facial plastic surgeon in private practice in Northampton, Massachusetts. He is medical director of the Aesthetic Laser and Cosmetic Surgery Center, which he founded in 1976. He is also coauthor of *Your Complete Guide to Facelifts* (Addicus Books, 2006), *Your Complete Guide to Facial Cosmetic Surgery* (Addicus Books, 2004), and *The Non-Surgical Facelift Book—A Guide to Facial Rejuvenation* (Addicus Books, 2003).

Dr. Truswell received a bachelor of science degree from Hobart College, Geneva, New York. He graduated from the University of Medicine and Dentistry of New Jersey and completed a residency in otolaryngology and facial plastic and reconstructive surgery at the University of Connecticut School of Medicine.

Dr. Truswell is board-certified by the American Board of Facial Plastic and Reconstructive Surgery and the American Board of Otolaryngology. He is a fellow of the American College of Surgeons, the American Academy of Facial Plastic and Reconstructive Surgery, the American

Academy of Cosmetic Surgery, the American Academy of Otolaryngology—Head and Neck Surgery, the American Society for Head and Neck Surgery, and the American Academy of Laser Medicine Surgery. He currently serves on the boards of directors for the American Academy of Facial Plastic and Reconstructive Surgery and the American Board of Facial Plastic and Reconstructive Surgery.

Dr. Truswell is a clinical instructor in facial plastic surgery in the Division of Otolaryngology, Department of Surgery, at the University of Connecticut School of Medicine. He is the designer of the Truswell Insertion Instrument for soft tissue implants, which is manufactured by Marina Medical Corporation.

A writer and lecturer, Dr. Truswell writes articles on facial plastic and reconstructive surgery in medical specialty journals, consults with other professionals writing books on facial plastic surgery, and lectures at facial plastic surgery meetings throughout the United States, Europe, and Asia. He recently has presented papers at the Royal College of Surgeons in London, was a guest lecturer at an annual meeting of the Canadian Academy of Facial Plastic and Reconstructive Surgery, and was on the faculty of the Second World Congress on Advanced Cosmetic Surgery in Ho Chi Minh City, Vietnam, where he was named an honorary professor of the Southeast Asia College of Cosmetic Surgery.

Dr. Truswell may be reached through his website, **www.truswellplasticsurg.com**.

“My goal is to perform rhinoplasty surgery that produces a natural yet functional nose that fades into and fits the face. When someone looks at a face, I want them to notice the eyes and lips. A well-performed rhinoplasty is one that is unrecognizable.”



Paul Nassif, M.D., F.A.C.S.

Paul S. Nassif, M.D., F.A.C.S., is a facial plastic surgeon in private practice in Beverly Hills, California. He is a partner and founder of Spalding Drive Cosmetic Surgery & Dermatology, which opened in 1999. Dr. Nassif received a bachelor of science degree from the University of Southern California. He attended medical school at the University of Southern California School of Medicine where he earned his medical degree. He completed an internship in general surgery and a residency in otolaryngology—head and neck surgery—at the University of New Mexico Health Sciences Center. He also completed a highly selective fellowship in facial plastic and reconstructive surgery with the American Academy of Facial Plastic and Reconstructive Surgery.

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Dr. Nassif has received international recognition by the media, patients, and peers for his innovative surgical techniques and is

renowned as a specialist in revision rhinoplasty surgery. In addition to his revision work, Dr. Nassif also specializes in rhinoplasty for ethnic noses, ensuring tailored results that look proportional to an individual's ethnic and racial features.

Affiliated with top hospitals and medical schools in southern California, Dr. Nassif has authored numerous peer-review articles on nasal surgery and has been called upon to give medical conference presentations and lectures about the latest surgical techniques. He teaches residents and colleagues at the USC and UCLA schools of medicine.

Dr. Nassif has been featured extensively in the press, including *E! Entertainment's Dr. 90210*, *NBC Nightly News*, *Inside Edition*, *CBS Healthbeat*, *Entertainment Tonight*, *Good Morning America*, *EXTRA*, *People*, *USA Today*, *Los Angeles Times*, *The Wall Street Journal* and the *Associated Press*.

Dr. Nassif is dedicated to helping patients less fortunate. He participates in "Face to Face," a national organization that offers consults and surgery to victims of domestic violence. His other philanthropic activities include the Lymphoma Research Foundation of America, Race To Erase MS, Coach for Kids, The Sheriff's Youth Foundation, The Arthritis Foundation, and Portraits of Hope, a creative therapy program that enhances the quality of life for hospitalized children.

For more information about Dr. Nassif and the procedures he performs, visit his web sites, **www.rhinoplastyspecialist.com** or **www.spaldingplasticsurgery.com**.

“*Facial plastic surgery can offer a tremendous boost to one’s self-esteem. It’s important to choose a surgeon with whom you have good communication. Remember that realistic expectations are a must for anyone considering facial plastic surgery.*”



Jon Mendelsohn, M.D.

Jon Mendelsohn, M.D., F.A.C.S., is a facial plastic surgeon in private practice in Cincinnati, Ohio. He is medical director of the Advanced Cosmetic Surgery & Laser Center. He is also coauthor of *Your Complete Guide to Facelifts* (Addicus Books, 2006), *Your Complete Guide to Facial Cosmetic Surgery* (Addicus Books, 2004), and *The Non-Surgical Facelift Book—A Guide to Facial Rejuvenation* (Addicus Books, 2003).

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Dr. Mendelsohn is a member of the American Academy of Facial Plastic and Reconstructive Surgery’s committees on multimedia and new technologies and devices. He is a national trainer in the use of Botox and

Restylane, and a regional trainer in the use of autologous platelet gels. He has presented nationally at conferences on facial plastic surgery and has authored numerous papers and publications on facial plastic surgery.

Dr. Mendelsohn may be reached through his website, **www.351face.com**.

“My goal with facial cosmetic procedures, whether major or minor, is to improve appearance in a measurable way with a natural-looking end result. This should serve to enhance a patient’s self-image and their quality of life.”



Harrison C. Putman III, M.D.

Harrison C. “Chris” Putman III, M.D., F.A.C.S., is a facial plastic surgeon and medical director of the Facial Plastic and Laser Surgery Center in Peoria, Illinois. He also serves on the Medical Executive Committee of the Peoria Day Surgery Center, a multi-specialty surgery center and associated recovery care center for overnight stays. He is an active staff member at OSF Saint Francis Medical Center and at Methodist Medical Center, also in Peoria, Illinois. Dr. Putman received a bachelor of science degree from the University of Notre Dame and his medical degree from Tulane University in New Orleans, Louisiana. His residency training in otolaryngology, facial plastic surgery, and head and neck surgery was also from Tulane University. He is certified by the American Board of Facial Plastic and Reconstructive Surgery and the American Board of Otolaryngology. He is a fellow of the American College of Surgeons, the American Academy of Facial Plastic and Reconstructive Surgery, and the American Society for Laser Medicine and Surgery. He is a past fellow of the American Head and Neck Society. Dr. Putman serves as an assistant clinical professor in the Department of Surgery Section of Otolaryngology and Head and Neck Surgery at the University of Illinois College of Medicine in Peoria, Illinois.

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Dr. Putman serves on the board of directors of the American Board of Facial Plastic and Reconstructive Surgery, for which he is credentials committee chairman for the twelve-state Midwest region. He is an oral examiner for the annual certifying examination of the board and also serves on its written exam committee. Dr. Putman is actively involved in teaching facial plastic and reconstructive surgery and laser surgery, as well as lecturing at facial plastic surgery meetings. He serves on the board of directors of several civic and national organizations, including the St. Jude Midwest Affiliate in Peoria, Illinois.

An avid sportsman, Dr. Putman enjoys golf, bird hunting, fresh and saltwater fishing, and other outdoor activities. He and his wife, Mary, enjoy travel, scuba diving, and other activities with their two children, Michelle and Christopher.

For more information about the procedures performed by Dr. Putman, visit his Web site: **www.putmanfps.com**.

“With the technology available today, facial cosmetic procedures of all types can be performed safely and with results that look very natural.”



David Ellis, M.D.

David Ellis, MD, FRCSC, FACS, is a facial plastic surgeon in private practice at the Art of Facial Surgery, Toronto, Canada. He received his medical degree from the University of Toronto and later became a fellow of the Royal College of Physicians and Surgeons in Otolaryngology (FRSCS). In 1984 Dr. Ellis became a fellow of the American College of Surgery and in 1989 he received his American board certification in facial plastic and reconstructive surgery.

Dr. Ellis holds the academic rank of professor at the Department of Otolaryngology, University of Toronto in Ontario, Canada. He is a “fellowship mentor” for young surgeons who wish to improve their skills in facial cosmetic surgery, and is also the core lecture coordinator for facial plastic surgery in the Department of Otolaryngology. He is an internationally known lecturer to many continuing medical education societies and universities in the United States, Mexico, and Britain.

Dr. Ellis has published thirty articles in peer-reviewed journals on facial plastic surgery, and has written twelve chapters in books on facial plastic surgery. He is an author of *About Face—a Consumer’s Guide to Facial Cosmetic Surgery in Canada*, (Macmillan Canada, 1992).

Dr. Ellis’s honors include being the founding president of the Canadian Academy of Facial Plastic Reconstructive Surgery, and past

president of the Canadian Society of Otolaryngology—Head and Neck Surgery. He has been elected to the board of the American Academy of Facial Plastic and Reconstructive Surgery as the Canadian vice president and again as director-at-large.

Dr. Ellis is a member of the Canadian Academy of Facial Plastic Surgery, the American Academy of Facial Plastic and Reconstructive Surgery, the Canadian Society of Otolaryngology—Head and Neck Surgery, the American Academy of Cosmetic Surgery, the Canadian Medical Association, and the Ontario Medical Association. He is president of the Canadian Academy of Facial Plastic and Reconstructive Surgery and is the Canadian delegate to the International Federation of Facial Plastic Surgical Societies (IFFPSS).

For more information about Dr. Ellis and the procedures he performs, visit his Web site: **www.artoffacialsurgery.com**.

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