WHAT IS RHINOPLASTY?  Rhinoplasty (surgery of the nose) is an operation that can produce changes in the appearance, structure, and function of the nose. It can reduce or increase the size of the nose, change the shape of the tip, narrow the width of the nostrils or change the angle between the nose and the upper lip. This surgery can also help correct birth defects, nasal injuries and help relieve some breathing problems. There is not a universal type of rhinoplasty that will meet the needs of every patient. Rhinoplasty is customized for each patient, depending on your needs.

WHO IS A CANDIDATE?  The best candidates for rhinoplasty are healthy individuals who are looking for improvements – not perfection – in the appearance of their nose, or who have breathing problems within their nose. In addition to realistic expectations, good health and psychological stability are important qualities for a patient considering rhinoplasty. Age may also be a consideration. Many doctors prefer not to operate on teenagers until after they have completed their growth spurt – usually at about 14 or 15 for girls, a bit later for boys. It is important to consider a teenager’s social and emotional adjustments and to make sure the surgery is what they, not their parents, really want.

ARE THERE ANY HEALTH CONSIDERATIONS THAT WOULD DISQUALIFY ME OR INCREASE RISKS FOR RHINOPLASTY?  The major contraindication is serious health problems, such as a cardiac or pulmonary condition. Since rhinoplasty is elective surgery involving the use of anesthesia the benefits should be carefully weighed against the risks. For a healthy individual risks are minimal, but for someone with a significant medical condition, a more careful evaluation is vital. If, after a consultation with Dr. Rohrich and medical clearance by your own doctor, you choose to proceed with the surgery, it will be done in a controlled setting, such as a hospital or accredited outpatient surgicenter, under general anesthesia.

ARE THERE ALTERNATIVES TO RHINOPLASTY?  There is really no alternative to rhinoplasty that will produce the same results of reshaping your nose. The alternative is the choice not to undergo the surgery. Certain internal nasal airway disorders may not require surgery on the exterior of the nose. Risks and potential complications are associated with alternative forms of treatment that involve surgery, such as septoplasty; to correct nasal airway disorders.

HOW DO I PREPARE FOR MY PROCEDURE?  The most important first step is to interview a board-certified plastic surgeon who has a true expertise in rhinoplasty; as rhinoplasty is the most difficult operation to obtain consistently good results in cosmetic plastic surgery. Gather as much information as possible about the procedure – including the recovery, any potential risks and complications, the costs, type of facility where the surgery will be done and what type of anesthesia will be used. It is good to use computer imagery which allows you to see what you will look like following your surgery. Good communication between you and your doctor is essential. Make sure you are comfortable and confident with the surgeon who will be performing the procedure. Being an informed and educated patient is critical.

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During the two-week period before your surgery, you should not take any medications which contain aspirin because aspirin has an effect on your blood’s ability to clot and could increase your tendency to bleed at the time of surgery and during the postoperative period. If you need minor pain medication you can take Tylenol. If you are taking any vitamins, herbal medications or supplements notify your doctor, as these can also cause problems during surgery. Dr. Rohrich may ask you to stop taking your medications or supplements for the two-week period prior to your surgery. Some homeopathic remedies taken prior to surgery can result in less pain and bruising, less scar tissue and better overall healing.

Finally, smoking impairs healing. If you smoke you must stop or Dr. Rohrich will not operate on you.

Be sure to arrange for someone to drive you home after the surgery and to help you out for a few days if needed.

**WHAT ARE THE TIMING OPTIONS FOR RHINOPLASTY?** The surgery should be done at a time when you are emotionally ready for it. It should certainly not be an impulsive decision, but one that has been carefully thought out. Once you decide to have rhinoplasty, plan your surgery at a quiet time, when you have at least 10 days to recover – not within several weeks of any major event in your life.

**HOW IS RHINOPLASTY PERFORMED?** During surgery the skin of the nose is separated from its supporting framework of bone and cartilage which is then sculpted to the desired shape. The nature of the sculpting will depend on the nature of your problem and your surgeon’s preferred technique. To remove a nasal hump a special file is used. A refined nasal bridge is formed by bringing together the nasal bones on either side of the face. In patients found to have the side of the nasal tip too large, some cartilage is removed. The angle between the nose and upper lip can be improved by elevating and trimming the septum, the dividing wall between the two chambers of the nose. In some cases it is necessary to narrow the base of the nose. This procedure involves removal of skin from both sides of the nostrils at the center. In order to improve the nasal contour it is sometimes necessary to add tissue. Finally, the skin is re-draped over the new framework.

There are two types of rhinoplasty. The open rhinoplasty approach, which is preferred by Dr. Rohrich, involves making a small incision across the columella, the vertical strip of tissue separating the nostrils, allowing the surgeon to see the entire structure of the nose. When the surgery is complete a splint is applied to help your nose maintain its new shape. Soft plastic splints may also be placed in your nostrils to stabilize the septum, the dividing wall between the air passages.

**CAN RHINOPLASTY BE COMBINED WITH OTHER PROCEDURES? WHICH ONES?** Rhinoplasty is often done in combination with many other procedures and can be done safely as long as the patient is healthy and the total operating time stays in the range of 6 hours. Once under anesthesia many patients choose to combine rhinoplasty with facelifts, body contouring surgery or breast surgery.

**WILL I NEED ANESTHESIA? WHAT TYPE?** Rhinoplasty can be performed under local or general anesthesia depending on the extent of the procedure and on what you and your

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surgeon prefer. With local anesthesia you will usually be lightly sedated and your nose and the surrounding area will be numbed; you will be awake during the surgery but relaxed and insensitive to pain. General anesthesia is done with an anesthesiologist and you will sleep through the operation. Dr. Rohrich prefers this type of anesthesia as it is safer for you. Many patients prefer general anesthesia because they are more comfortable and often get less anesthesia under a general than when the surgeon uses local anesthesia with sedation.

**IS ANY SPECIAL EQUIPMENT REQUIRED TO PERFORM RHINOPLASTY? WHAT SPECIAL TRAINING IS REQUIRED?** Specialized rhinoplasty instruments and “tools of the trade” are used for the surgery. Rhinoplasty is one of the most difficult operations in cosmetic surgery as the difference between a good result and a poor result is a millimeter. Consequently, this procedure requires a skilled plastic surgeon that has a special interest, expertise, and experience with rhinoplasty.

**ARE IMPLANTS OR INJECTIBLES USED IN RHINOPLASTY? DO THESE CARRY ANY ADDITIONAL RISKS FOR THIS PROCEDURE?** Implants or injectables are usually not used in rhinoplasty except the patient’s own tissue like septal, ear, or rib cartilage. Occasionally, Alloderm, a natural substance made from human tissue is injected or placed to correct defects or irregularities in the nose.

**WILL I BE HOSPITALIZED OR CAN RHINOPLASTY BE PERFORMED ON AN OUTPATIENT BASIS?** Rhinoplasty may be performed in a surgeon’s office based facility, an outpatient surgery center or a hospital. It is usually done on an outpatient basis for cost containment and convenience. If the patient has combined procedures the patient may require a short inpatient stay.

**HOW WILL I LOOK IMMEDIATELY AFTER?** You will have a splint on the outside of your nose, a small gauze at the bottom of your nose and initially you will not be able to see under the splint, as your nose will be swollen. You will notice the swelling and bruising around your eyes will increase at first, reaching a peak after 2-3 days. But you will feel a lot better than you will look. After 5-7 days, when the splint is removed, you will still have a moderate amount of swelling, but most should disappear within about 2 weeks. Some subtle swelling, unnoticeable to anyone but you and your surgeon, will remain for several months. You will see the final results at the top of the nose at 6-9 months, and at the tip between 9-15 months following surgery. During the days following surgery when your face is swollen and may be bruised, it is easy to forget that you will be looking better shortly.

**HOW WILL I FEEL IMMEDIATELY AFTER?** Other than feeling a bit drowsy, you should feel pretty good and be able to go home within a few hours following surgery. Your face may feel puffy, your nose may ache, and you may have a dull headache. You can control any discomfort with pain medication prescribed by your surgeon. It is not uncommon to feel depressed right after plastic surgery, especially when you look in the mirror and see a swollen face with a splint on your nose. Rest assured that this stage will pass. Day by day, once the splint is removed, your nose will begin to look better and your spirits will improve.

**HOW LONG DOES THE PROCEDURE TAKE?** Rhinoplasty usually takes an average of 2 hours, though complicated procedures may take longer.

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HOW MANY SURGICAL PROCEDURES WILL I REQUIRE? Usually you require only one. In one case out of 40 a surgical revision may be necessary one-year post operatively for a variety of different reasons. The healing process is a uniquely personal experience.

WHAT DOES THE RECOVERY ENTAIL? For the first day plan on keeping your head elevated when in bed. You are encouraged to walk but not exert yourself. After the first few days you will be up and about and able to return to work within a week to 10 days. Applying cold compresses will reduce initial swelling and make you feel a bit better. All dressings, splints, and stitches should be removed at 5-7 days. Dr. Rohrich will schedule frequent follow-up visits during the months following surgery to check on the progress of your healing. If you have any unusual symptoms between visits or any questions about what you can and cannot do, do not hesitate to call Dr. Rohrich.

HOW LONG DOES IT TAKE BEFORE I CAN RETURN TO NORMAL ACTIVITY? For the first 3-5 days following surgery relax and take it easy. You should be able to return to work within a week or 10 days following surgery. It will be several weeks, however, before you are entirely up to speed. Your doctor will probably advise you to avoid strenuous activity (jogging, swimming, bending, sexual relations, any activity that increases your blood pressure) for about 3 weeks.

WILL PEOPLE BE ABLE TO TELL THAT I HAVE HAD SURGERY? The goal of rhinoplasty is to create a natural looking nose that matches your face. Chances are that if you had a huge bump on your nose and made a radical change, people will notice that you have had surgery. If, however, the changes were more subtle, others may not know that you had surgery, but notice that you look great, even if they are not sure why! That is the sign of a great rhinoplasty.

IS THAT ALL THERE IS TO KNOW ABOUT RECOVERY? A little bleeding is common during the first few days following surgery and you may continue to feel some stuffiness for several weeks. Your surgeon will probably ask you not to blow your nose for a week or so while the tissues heal. You should also avoid hitting or rubbing your nose or getting it sunburned for 8 weeks. Also, be gentle when washing your face and hair or using cosmetics. If you wear glasses they will have to be taped to your forehead or propped on your cheeks for about 4 weeks until your nose is completely healed.

ARE THERE WAYS TO REDUCE THE HEALING PERIOD AND TO MINIMIZE BRUISING AND SWELLING? The best way to minimize bruising is not to use any products containing aspirin for at least 2 weeks preoperatively and 2 weeks postoperatively. There are some suggested postoperative homeopathic remedies for patients undergoing cosmetic surgery. Dr. Rohrich recommends the following: Arnica montana (leopard’s bane), four pills, twice a day for two weeks which helps minimize swelling after surgery and promotes healing; Bromelain (pineapple extract), three pills twice a day between meals for two weeks, which helps minimize pain and bruising and promotes healing; Pycnognol, one pill twice a day, which is an anti-inflammatory agent and helps promote healing; 500 mg. of Vitamin C, twice a day for 2-3 weeks following surgery which helps promote healing; and 60 mg of Zinc, once a day, for 2-3 weeks following surgery, which helps with bruising and promotes tissue repair.
WHAT TYPE OF NEW SCARS ARE CREATED? With the method of rhinoplasty performed from within the nose there are no visible scars. Using the open procedure the scars are often imperceptible.

HOW LONG WILL THE RESULTS LAST? The best news if you are pleased with the results of your new nose, is that your nose will age as gracefully as you do, as the procedure lasts a very long time.

WHAT ARE THE LIMITATIONS, RISKS OR COMPlications OF RHINOPLASTY? With any type of surgery, there are risks. Your choice to undergo a surgical procedure is based on the comparison of the risks with the potential benefits. When rhinoplasty is performed by a qualified board-certified plastic surgeon with expertise in rhinoplasty, complications are infrequent and usually minor. Nevertheless, there is always a possibility of complications, including infection, nosebleed, or a reaction to the anesthesia. While unusual, one of the possible risks of the surgery is bleeding. Should significant post-operative bleeding occur, it may require emergency treatment to stop the bleeding, or even require a blood transfusion in rare situations. If an infection occurs, which is also highly unusual, additional treatment including antibiotics may be necessary. After surgery small blood vessels may burst and appear as tiny red spots on the skin’s surface. These are usually minor but may be permanent.

When rhinoplasty is performed from inside the nose, there is no visible scarring at all; when an “open” technique is used or when the procedure calls for the narrowing of flared nostrils, the small scars on the base of the nose are usually not visible but abnormal scars may occur, both within the skin and the deeper tissues. Scars may be unattractive and of different color than the surrounding skin. There is also the possibility of visible marks from sutures. While very rare, additional treatments, including surgery, may be needed to treat scarring.

Deeper structures such as nerves, tear ducts, blood vessels, and muscles may be damaged during the course of surgery and this may be temporary or permanent. The potential for this to occur varies with the type of rhinoplasty procedure performed. Other possible risks of rhinoplasty include: numbness or loss of skin sensation in the nasal skin; asymmetry – a variation from one side to the other side of the nose; an allergic reaction to tape, suture material or topical preparation (only reported in rare cases); delayed healing or wound disruption which may require frequent dressing changes (more common among smokers); nasal septal perforation that may require further surgery (also a rare occurrence); nasal airway alterations which may require further surgery (also a rare occurrence); and nasal airway alterations which may interfere with the passage of air through the nose. You may also have complications from surgical anesthesia. While rare, there is the possibility of complications, injury and even death from all forms of surgical anesthesia or sedation. Although the majority of patients do not experience these complications, you should discuss each of them with your doctor to make sure you understand any risks, potential complications and consequences of rhinoplasty.

In about one case out of 40, a second procedure may be required – for example, to correct a minor deformity. Such cases are unpredictable and happen even to patients of the most skilled surgeons. The corrective surgery is usually minor.

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WHAT ARE THE BENEFITS OF RHINOPLASTY? Benefits are both physical and psychological. When you feel that you look better, it’s only natural that you will have a better self-image and more self-confidence.

WHAT DOES THIS PROCEDURE COST? While rates vary among surgeons and the amount of work done during surgery, the surgeon’s fee for a primary rhinoplasty ranges from $4,500 to $6,500. The surgeon’s fee for a secondary rhinoplasty is usually more due to the complexity ranging from $5,500 to $9,000. There are also additional fees for the operating room and anesthesia if you decide on other procedures.

WHAT CAN I REASONABLY EXPECT? You can expect to feel better about the face that stares back at you in the mirror. If you discussed your expectations thoroughly with your surgeon, there should be no surprises. You should have a nose that has been reshaped to look natural and fit your face. Remember, however, that healing is a slow and gradual process. Some swelling may be present for months, especially in the tip. The final results of rhinoplasty may not be apparent for up to 12-15 months.

WHAT TYPES OF RESULTS CAN BE ACHIEVED FROM RHINOPLASTY? Results vary greatly depending on your original nose and your vision of a new nose. After discussing your expectations with your surgeon you may choose to have a bump removed, to reshape the tip of your nose, to improve the angle between your nose and upper lip, or to bring your nostrils closer together. If you have functional problems in your nose – trouble breathing or a problem with snoring - rhinoplasty can also help alleviate these problems.

WHAT QUESTIONS DO I NEED TO ASK WHEN SEEING A DOCTOR TO PERFORM RHINOPLASTY? Important questions include: How much experience do you have in rhinoplasty? How many of these procedures do you do every year? Are you a board-certified plastic surgeon? Do you have access to photo imaging so I can see on a computer how I will look after surgery? Do you do more primary or secondary (corrective) rhinoplasty? What is your revision ratio? Can I see before-and-after photos of some of your patients? Where do you perform the surgery? What kind of anesthesia do you use?

WHAT IS THE SATISFACTION RATE FOR RHINOPLASTY? If you have realistic expectations, a clear vision of the results and good communication with your surgeon, the satisfaction rate is over 90% - creating a natural looking nose that fits the shape of your face and makes you smile when you look in the mirror.

I have read and understand the facts and information presented about the rhinoplasty procedure and realize that plastic surgery, including this cosmetic procedure, is both an art and a science and that a quantitative/specific result cannot be guaranteed prior to the surgery.

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