



POST-OPERATIVE INSTRUCTIONS

Facelift & Necklift

Deep-Plane Facelift · Deep Neck Lift

Thank you for entrusting Dr. Aharonov with your care. This guide brings together everything you need before and after your facelift and neck lift — how to prepare, what to expect each step of the way, and how to care for yourself as you heal. Please read it fully before your surgery day, and keep it nearby during your recovery.

01 BEFORE YOUR SURGERY

Planning Ahead

- If you live outside the immediate Los Angeles area, we can assist you in arranging accommodations as well as your post-operative care needs.
- You may not be alone for the first 24 hours after surgery. Please arrange for someone to pick you up and stay with you through the first night — or let us help you arrange an aftercare facility or private nurse. You will also need a driver for your post-operative visit the next day.
- Fill all of your prescriptions before surgery day, so everything is waiting for you at home.
- Begin taking the vitamins we recommend. The amounts below are suggested; a little more or less is perfectly fine. Continue for 3 to 6 months after surgery:
Alpha Lipoic Acid 600 mg · Vitamin C 1,000 mg · Zinc 50 mg · Biotin 3,000 IU
- For at least 10 days before surgery, do not take aspirin, ibuprofen, NSAIDs, fish oil, or large doses of vitamin E. For pain or aches, take only Tylenol (acetaminophen).
- If you take a GLP-1 medication (such as Ozempic, Wegovy, or Mounjaro) or Adderall, please let us know — these need to be discontinued before surgery.
- If you are under 35 and otherwise healthy, no blood tests are needed. If you are over 35 or have major health concerns, please have blood tests done — with your own doctor or through our office — at least one week before surgery.
- Patients over 45 need a complete history and physical, along with clearance for surgery from their physician.
- You may color your hair up to 2 weeks before surgery.
- No smoking or tobacco, no nicotine products, and no marijuana smoking for at least 4 weeks before surgery — and do not smoke at all while you are healing. Smoking can cause skin loss and poor wound healing.
- Avoid alcohol for 7 days before surgery, and eat a low-salt diet the week of surgery to minimize swelling.
- Have on hand: small bags of frozen peas, gauze, Q-tips, button-front shirts, a wedge pillow or travel neck pillow, and the antibiotic ointment from your pre-operative visit.

02 YOUR MEDICATION SCHEDULE

Medications

THE DAY BEFORE SURGERY

- Azithromycin (antibiotic): take 2 tablets today, then 1 tablet daily until the package is complete.
- Methylprednisolone dose pack: begin today — take all 6 tablets as directed on the package, and continue as directed until the package is complete.
- Important: do not take Azithromycin and Methylprednisolone at the same time. Separate them to help minimize stomach upset.

THE MORNING OF SURGERY

- Hibiclens wash, if provided: wash your hair, face, neck, and shoulders — cleaning each area twice. Let the rinse sit in your hair for 5 minutes, rinse, then repeat.
- Afterward, do not apply shampoo, conditioner, lotion, moisturizer, makeup, sunscreen, perfume, deodorant, hair products, or any other skincare products.
- Bring 2 Journavx tablets with you to the surgery center; they will be given under the supervision of the nurse or anesthesiologist.
- Bring your Scopolamine patch and hand it to the nurse or anesthesiologist. Do not apply it yourself unless instructed.

- Beginning the evening after surgery: take 1 Journavx tablet every 12 hours, as prescribed.
- Percocet has been provided for pain relief after surgery.
- Zofran has been prescribed for nausea — take it at the first sign of nausea.
- Benadryl may be taken at bedtime if needed for sleep.
- Glycopyrrolate (only if prescribed — for patients who had submandibular gland reduction): take as directed. It will make your mouth feel very dry; this is expected.

03 THE DAY BEFORE

The Day Before Surgery

- Confirm the time of your surgery with our office.
- Do not drink any alcohol, and avoid excess salt.
- Do not eat or drink anything during the 8 hours before your surgery, unless otherwise instructed.

04 SURGERY DAY

The Morning of Surgery

- Shower and wash your hair as described above — with the Hibiclens rinse if you were given one. Towel-dry your hair afterward.
- Do not put any other products in your hair or on your face, and do not wear any makeup — including moisturizer. Remove all jewelry, including any removable piercings.
- Wear something comfortable that will not be tight around your head; a button-up shirt works best.
- If you wear contact lenses, bring glasses or a lens case so you can remove them before surgery.
- Bring your prescription medications with you.
- Please arrive on time to the surgery center — arriving on time is important. The nurse and anesthesiologist will prepare you for surgery.
- If we arranged a caretaker for you, please coordinate your pickup time with the caretaker from the surgery center.

05 RECOVERY BEGINS

The Evening After Surgery

WHAT TO EXPECT

- Your head will be wrapped in a dressing. Some patients have small drains in place overnight, or a fine temporary mesh of sutures (hemostatic net) on the skin — these are used selectively, not for everyone. The mesh is typically removed 2 to 3 days after surgery.
- Dr. Aharonov will call you in the evening to check on you.
- You will feel groggy from sedation, and mild nausea is common.

HOW TO REST

- Ice your eyes and face while you are awake — about 20 minutes on and off. Use small bags of frozen peas; nothing heavier.
- While you are awake, keep your head and shoulders elevated at least 30 degrees.
- Sleep on your back — you may lie flat. Keep your neck extended and avoid flexing your neck or tucking your chin to your chest. A travel neck pillow can keep you from rolling.
- Your caretaker should watch for rapid swelling on one side of the face — call us immediately if this happens.

MEDICATIONS

- Take your medications as directed.
- Use Tylenol as the foundation for pain control, and the prescription pain medication for breakthrough pain only. Do not take aspirin, ibuprofen, naproxen, Advil, or Aleve.
- Do not drive while taking prescription pain medication.

EATING AND DRINKING

- Eat and drink lightly — only as much as you feel like. Avoid excess salt and alcohol.

06 DAY ONE

The Day After Surgery

- Your post-operative visit is today: your dressing will be removed. Drains are usually removed as well, but a drain is sometimes kept in longer depending on its output.
- Begin caring for your incisions: gently clean them and apply antibiotic ointment as needed to keep them moist at all times, until your sutures are removed.
- Continue to ice on and off today.
- Starting 48 hours after surgery, you may shower and wash your hair with lukewarm water and a gentle shampoo. Wash your hair at least once a day and gently clean the incisions with your fingertips. Do not blast the incisions with strong water pressure, and do not use a hot hair dryer on numb areas.
- Take short walks today — walking helps prevent blood clots. Do not bend, lift, or strain.
- Eat lightly, keep salt low, and drink plenty of fluids.

07 WEEKS ONE TO TWO

The First Two Weeks

WHAT IS NORMAL

- Swelling and bruising peak around days 2–3, then steadily improve over 10–14 days. Some asymmetry is normal.
- Tightness in the face and neck is expected; turning your neck may feel stiff for several weeks.
- Numbness and tingling are normal and can last weeks to months — tingling means the nerves are waking up.
- Your face may look and feel strange at first. A low emotional point around day 7 is common and passes.
- A mild temperature under 100.4°F during the first days can be normal.

ACTIVITY

- Sleep on your back for the first 2 weeks — you may lie flat, but keep your neck extended and avoid flexing your neck or tucking your chin.
- Do not bend over, lift anything heavier than 5 lbs, or strain for 2 weeks.
- No exercise that raises your heart rate for 2 weeks — walking is encouraged.
- No sexual activity for 2 weeks.
- Turn your head and shoulders as one unit, and do not pull on your earlobes.
- Sneeze with your mouth open, and do not blow your nose forcefully.

WHAT TO AVOID

- No smoking or nicotine while you are healing.
- No saunas, steam rooms, or soaking (baths, pools, hot tubs) for 3 weeks.
- No dental work for 3 weeks.
- No heavy or tight earrings for 6 weeks.

SUTURES AND INCISION CARE

- Your sutures will be removed by Dr. Aharonov 6 days after surgery.
- Apply ointment for one more day after suture removal — then begin applying Rare Reagent Skin Recovery Complex to the incisions twice daily. It is intended to quicken scar healing and reduce redness.
- Makeup may be worn away from the incisions once sutures are out; keep all makeup off the incision lines until then.

08 WEEKS THREE AND BEYOND

The Weeks Ahead

- Most swelling has resolved, though residual firmness or small lumps under the skin are normal for several months.
- You may slowly ease back into exercise at about 2 weeks after surgery, unless otherwise directed.
- Protect your scars from the sun: sunscreen and a wide-brim hat for at least 3 months. Keep scars out of direct sun for 6 months — sun turns scars dark.
- Once the incisions are fully healed, silicone gel or sheets and gentle massage (as directed) help scars mature.
- Scars go from red to pink to faded over 6–12 months; the incisions behind the ears are the slowest to settle.
- You may color your hair 4 weeks after surgery.
- Numbness can take months to fully resolve.

09 WHEN TO CALL THE OFFICE

Contact us immediately if you experience any of the following:

- Rapid swelling on one side of the face, or severe pain on one side
- Bleeding that does not stop with gentle pressure
- Fever over 101°F
- Increasing redness, warmth, spreading redness, or foul-smelling drainage
- Significant pain not relieved by medication
- Any change in vision
- Calf pain or swelling — or chest pain or shortness of breath (call 911)
- Persistent vomiting

Dr. Aharonov will call you the evening after surgery. For anything urgent, call the office at 310.276.1126 — we are always available for you.

10 STAYING IN TOUCH

Follow-Up Appointments

Please be sure to schedule all of your follow-up appointments. If you live out of town, follow-ups can be done virtually. A typical schedule — unless otherwise discussed — is:

Day After	6 Days	2 Weeks	1 Month	3 Months	6 Months	1 Year
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Additional appointments can be scheduled any time, as you desire or need. We are always available for you — please do not hesitate to contact us with any questions.