POST-OPERATIVE INSTRUCTIONS

Endoscopic Browlift

Endoscopic Forehead Lift

Thank you for entrusting Dr. Aharonov with your care. This guide brings together everything you need before and after your endoscopic browlift — 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.

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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

– You may also take Arnica Montana and bromelain starting 2 days before surgery, if you like.

– 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 have had Botox in your forehead or around your brows, please tell us — it is best to let it wear off before surgery so your natural brow position can be assessed.

– 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, a gentle baby shampoo, button-front shirts, and a wedge pillow or travel neck pillow.

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.

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. A small drain may exit behind the hairline — it will be removed at your visit the next day (post-op day 1).
- Dr. Aharonov will call you in the evening to check on you.
- You will feel groggy from sedation, and mild nausea is common.
- A headache or 'headband' pressure across the forehead is common for the first 24 hours.

HOW TO REST

- Ice your forehead and eyes 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 with your head elevated — do not sleep on your side or stomach.
- Your caretaker should watch for rapid swelling on one side of the forehead — 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, and your drain will be removed as well. Removing the drain takes only a moment — you may feel a brief sting or pulling sensation.

– Begin caring for the small scalp incisions: gently clean them and apply antibiotic ointment as needed to keep them moist.

– Continue to ice on and off today.

– You may shower and wash your hair with lukewarm water and a gentle baby shampoo. Let warm water run through your hair — do not scrub the incisions. Pat dry gently.

– 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.

BROW PRESSURE — STARTING TODAY

– Starting today (post-op day 1), place your palms over your brows and press gently upward for 3 minutes, 5 times a day. Use flat palms, not fingertips, and keep the pressure gentle.

– Continue this daily until we tell you to stop. It helps support your brows in their lifted position as they heal.

07 WEEKS ONE TO TWO

The First Two Weeks

WHAT IS NORMAL

– Swelling and bruising of the forehead and eyelids peak around days 2–3, then steadily improve over 10–14 days. Bruising often settles around the eyelids — this is simply how fluid drains and is expected.

– Tightness across the forehead and scalp is expected.

– Numbness and itching of the forehead and scalp are normal. Numbness can take 3 to 6 months to fully resolve, occasionally longer — itching or tingling means the nerves are waking up.

– Your brows may look higher than expected at first — do not worry. They settle into a natural position over the coming weeks, with the final position settling by about 3 months.

– You may feel the small fixation devices under the scalp; they dissolve on their own over several months.

– Some shedding of hair around the incisions can occur; normal growth resumes within weeks to months. Permanent hair loss is rare.

– A mild temperature under 100.4°F during the first days can be normal.

ACTIVITY

– Sleep on your back with your head elevated — not on your side or stomach.

– 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.

– Be very careful brushing your hair, and keep the hair dryer on a cool setting — do not use heat on numb areas.

– Do not pluck your eyebrows for 2 weeks.

– Most patients return to work in 7 to 10 days.

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 flying for 7 to 10 days after surgery unless we clear you.

– No hair coloring or chemical treatments for 6 weeks.

– No dental work for 3 weeks.

– Do not wear contact lenses until cleared.

SUTURES AND INCISION CARE

- Your sutures or staples will be removed 6 days after surgery.
- Keep the incision lines moist with ointment until then.
- Makeup may be worn away from the incisions after 10 days; keep all makeup off the incision lines until then.
- After suture removal, begin applying Rare Reagent Skin Recovery Complex to the incision lines twice daily. It is intended to quicken scar healing and reduce redness.

08 WEEKS THREE AND BEYOND

The Weeks Ahead

- Most visible swelling and bruising have resolved, though subtle firmness can linger for several months.
- You may slowly ease back into exercise at about 2 weeks after surgery, unless otherwise directed.
- It can take about 3 months to see the final brow position — be patient with the settling process.
- Protect your scars from the sun: sunscreen and a wide-brim hat for at least 3 months.
- Numbness and itching continue to improve over months.
- You may color your hair 6 weeks after surgery.

09 WHEN TO CALL THE OFFICE

Contact us immediately if you experience any of the following:

- Rapid swelling on one side of the forehead, or severe headache not relieved by medication
- 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	Day 6 (Sutures Out)	1 Month	3 Months	6 Months	1 Year

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.