

Rhinoplasty / Facial Surgery

POST-SURGICAL PROCEDURE CARE PROTOCOL

IMMEDIATE POST-OP (DAYS 1-3)

Splint & Packing

Keep the external nasal splint completely dry and intact. If nasal packing or a drip pad is placed under the nose, change the gauze pad as it becomes saturated. Do not remove internal splints or packing yourself.

Congestion & Breathing

Expect significant nasal congestion. **Do not blow your nose.** If you need to sneeze, do so with your mouth open to avoid sudden pressure changes in the nasal cavity.

Swelling

Apply cold compresses or ice packs wrapped in a cloth to your cheeks and eyes—**never directly on the nose or splint**—for 15–20 minutes at a time to manage swelling.

DAYS 4-14

Nasal Hygiene

Use a gentle saline nasal spray (as directed) to keep internal passages moist and help clear dried crusting. You can carefully clean the very edge of the nostrils with a cotton swab dipped in hydrogen peroxide or sterile water, followed by a thin layer of ointment if prescribed.

Splint Removal

The external splint is typically removed around day 7. The skin underneath may be oily or sensitive; clean it very gently.

Glasses Restriction

Do not rest eyeglasses or sunglasses directly on the bridge of the nose for at least 4 to 6 weeks. If necessary, tape the glasses to your forehead or use a foam spacer.

LONG-TERM RECOVERY

Activity

Avoid contact sports, vigorous exercise, or any activity where the face risks accidental trauma for at least 6 weeks.

Residual Swelling

Note that while major swelling drops within a month, the tip of the nose retains subtle fluid. Final refinement can take up to a full year.