



Capsulectomy Pre-Operative Instructions

Pre-operative Information for General Anaesthetic procedures

This pre-operative guide aims to help you prepare for your surgery. Please let us know if you have any new medical problems or medications prior to surgery.

Weight loss

If you are planning to lose weight, it is preferable to wait until you have reached your target weight as agreed in the consultation, prior to any surgery. This will not only improve the cosmetic result but reduce the possibility of complications. If your BMI is over 30 then you have a significantly higher risk of complications from chest infection through to wound healing problems and bleeding.

Smokers

You must stop smoking for a minimum of two weeks before the surgery, although discontinuing earlier is preferable. Nicotine diminishes blood oxygen levels and can markedly elevate the likelihood of post-operative healing complications. Since it's the nicotine and not the smoke itself that poses issues, this caution **extends to nicotine replacement therapies** such as chewing gum, e-cigarettes, and patches.

Sickle cell trait or sickle cell disease

If you have either condition, it is essential that we are made aware of this prior to your surgery to ensure that you are optimised and have blood transfusions and anticoagulation if necessary. This will be fully discussed at your initial consultation.

Compression garments or bras

For certain operations you will be advised to purchase these prior to surgery. If required, my nurse can size you in clinic and advise you as to which garments to purchase. You can either buy these from the Hospital before surgery, or alternatively, we can provide you with the supplier details should you wish to obtain your own.

I would recommend that you obtain 2 garments, as you will want one to wash and one to wear. They need to be worn continuously for 4 to 6 weeks after surgery, although you can remove them for washing.



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Dressing allergies

Please let me know if you have an allergy to tissue glue or any dressings so I can select an appropriate dressing for your incisions.

Medications

Certain medications should be stopped prior to surgery as they can cause blood clots or excessive bleeding. These include:

- **Aspirin / Clopidogrel:** To be stopped 2 weeks prior to surgery as they can cause excessive bleeding and haematoma formation.
- **Warfarin:** This should be stopped 4 to 5 days before surgery, depending on your INR and the indications for the Warfarin. We will start a blood thinning injection to protect you whilst the Warfarin has been discontinued.
- **Tamoxifen:** To be stopped 4 weeks before surgery as Tamoxifen can cause blood clots. This is particularly important if you are having a free flap breast reconstruction (for example a DIEP Flap) or skin reduction surgery.
- **Oral Contraceptives/HRT:** Hormonal medications should be stopped 4 weeks before surgery as they can increase the risk of blood clots.

Pre-operative assessment

Prior to your surgery, you will be given a pre-operative assessment with the anaesthetist. This can be either over the phone or in the clinic, if the anaesthetist wishes to see you face to face prior to surgery. Depending on your age and general health, routine blood tests, MRSA swabs and a heart tracing (ECG) may be taken.

You will also have an opportunity to ask any questions you may have or raise any concerns.

If you are unsure whether you wish to proceed with a procedure, then it is strongly advised not to proceed with surgery.



Anne Dancey
PLASTIC SURGERY

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Admission to hospital

This will normally be on the day of your operation. If you are having a general anaesthetic, you will be asked not to eat anything 6 hours before surgery. Black tea/ coffee or non-fizzy drinks (nothing containing milk) can be taken up to 4 hours before surgery. Chewing gum should also be avoided for 6 hours before your operation.

Sometimes delays can occur, however, you will be cared for whilst waiting under the direction of the anaesthetist and the nursing team.

I will come and see you with the anaesthetist before you go to the operating room. I will take pre-operative photographs and go over the operation again to remind you of any risks or complications.

If you have any questions or concerns, there will always be sufficient time made to answer them.

At any time if you are unsure about anything concerning surgery, then please do not hesitate to speak to me.



I hope you find this information useful. If you have any questions or require a little more information, then please do not hesitate to contact me.

Anne Dancey

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