

Hair Transplant Surgery

Information & Instruction Booklet

Prepared by

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REVIEW THESE INSTRUCTIONS AT LEAST 2 WEEKS BEFORE SURGERY

KEY CONTENTS OF INSTRUCTION BOOKLET

- 1. PRE-OPERATIVE INSTRUCTIONS
- 2. POST-OPERATIVE INSTRUCTIONS
- 3. MEDICATIONS TO AVOID BEFORE SURGERY
- 4. FREQUENTLY ASKED QUESTIONS

PREOPERATIVE INSTRUCTIONS FOR HAIR TRANSPLANT

INTRODUCTION

Congratulations on taking the next step toward hair restoration. The staff and I are looking forward to your upcoming procedure, and have prepared this document to get you ready. This document is the culmination of years of practice in the field of hair restoration surgery to help prepare you for this important day. As patients ask questions, we are constantly updating this document. Please read it carefully well before your surgery date. There are many tasks that need to be done prior to the date of surgery to fully prepare you.

Please note that the Gabel Center is located in Tigard, Oregon (intersection of Dartmouth and 72nd Ave). *The address is: 12115 SW 70th Avenue, Suite 200, Tigard, Oregon, 97223*

We have a new, 4200 square foot, state of the art facility dedicated to hair restoration and aesthetics to make your experience as best as possible.

A. MEDICATIONS

Medications will be given to you on the day of your surgery. If needed, the office may ask that you pick up a prescription for medications at the pharmacy of your choice to be taken before the day of surgery or the morning of surgery. This must be arranged with our office at least one week prior to your procedure. Please notify the office of any medical conditions that you may have or any allergies to medications. Also, please be sure that you have provided the office with a list of your current medications and allergies to medications.

Description of Medications

- 1. An antibiotic will be prescribed and provided to you on the morning of surgery to help reduce (not eliminate) your risk of an infection. If you have any allergies to medications or antibiotics, please inform the office so Dr. Gabel can prescribe the appropriate antibiotic. If you have a medical condition that requires you to take a specific medication (such as a hip prosthesis or implant) prior to surgery, please inform Dr. Gabel and the office before surgery. Most commonly we will give you doxycycline 100 mg twice a day for 5 days, or Keflex 500 mg twice a day for 5 days.
- 2. Oxycodone: This is a <u>pain</u> medication that can be taken every 4 6 hours as needed for pain. Follow the instructions given to you by Dr. Gabel and on the bottle. This medication is only provided if the strip harvest donor method is used. For the FUE donor harvest method, patients do not typically need narcotics. If you are sensitive to oxycodone, or other pain medications, please alert the office. Do not drive, operate machinery, sign any legal documents, or make important decisions if taking any narcotic medication for pain in the postoperative period for 24 hours after the last dose of narcotic medications.
- **3. Diazepam (Valium)** / **Versed (Midazolam):** As needed, Dr. Gabel will administer medication prior to the procedure to reduce anxiety and promote relaxation.
- **4. Polysporin Ointment**: This is an over the counter antibiotic ointment that will be applied lightly to the sutured area 1 2 times daily for 12 days.
- **5. Ibuprofen (Motrin® or Advil®)**: This is an over the counter pain reliever and anti-inflammatory medication that you need to purchase prior to the procedure. You will only use this after the procedure, not before. Each tablet is 200 mg. Do not exceed 16 tablets (3200 mg) in a 24-hour period.

- **6. Tylenol**® **(Acetaminophen)**: This medication will be used with ibuprofen to help with postoperative pain. If you have an allergy to this medication, or have liver disease, do not take it. I recommend obtaining the 500 mg tablets. Do not take more than 3000 mg in a 24-hour period.
- 7. Vitamin K: This is a vitamin that helps to decrease bleeding during the surgery. Please take 1 tablet daily (100 mcg) starting 7 days prior and the morning of surgery. The tablet dose may vary which is not a problem. It is usually around 100 mcg. We suggest obtaining vitamin K1 if possible, but either K1 or K2 is acceptable.

Several medications will be used during your procedure for pain control or to help keep you relaxed. If you have a known allergy to any of these medications, please notify Dr. Gabel and do not take it. Please notify Dr. Gabel if you have ever experienced any allergic or adverse reactions to medications. Most importantly, **do not drive**, operate machinery, or make any significant decisions while taking any narcotic medications for pain in the post op period or after any treatments.

B. MEDICATIONS AND ITEMS TO AVOID BEFORE SURGERY:

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Please check with the office as to continuing or discontinuing any medications that you take regularly. Depending on your health, you may receive a prescription to have blood work or a medical clearance to be performed prior to your procedure. The results should be forwarded to our office at least 3 weeks prior to surgery.

GENERAL MEDICATIONS: Do not use Minoxidil (Rogaine®) for 2 weeks prior to the procedure. There are several over the counter medications that should be avoided prior to surgery. Do not take aspirin, Vitamins E & B, Advil®, Alka-Seltzer®, Bufferin®, Excedrin®, Empirin®, Motrin®, Ibuprofen, Naproxen or other anti-inflammatory medications. In addition, do not take any herbal products such as Ginkgo or weight-lifting formulas for 2 weeks prior to your procedure. Stop taking Vitamin E and fish oil. If you are on any of these medications/vitamins, please stop them 2 weeks prior to surgery if OK by the prescribing physician. Please refer to the list MEDICATION / VITAMINS/ HERBS TO AVOID SECTION OF THIS INSTRUCTION BOOKLET.

BETA-BLOCKER MEDICATIONS: **Very important**: if you are on a *beta-blocker for hypertension or anxiety*, please notify Dr. Gabel and do not take it the day before surgery nor the day of surgery - you may take it the day after the procedure is finished. The beta-blockers most concerning to Dr. Gabel are the following:

propranolol	labetalol	pindolol
bucindolol	nadolol	sotalol
carteolol	oxprenolol	timolol
carvedilol	penbutolol	

If you are taking any of these medications, please obtain permission from your personal physician to stop them at least 1 day prior to the procedure. If taken on the day of, or the day before the procedure, Dr. Gabel may have to cancel the case as these medications make it unsafe to administer local anesthetics which are needed for the hair transplant procedure.

ALCOHOL/NICOTINE: Do not drink alcohol for 7 days prior to surgery and avoid it after surgery, if you are on any narcotic pain medications or antibiotics prescribed by Dr. Gabel. Even one drink will cause increased bleeding. Please avoid smoking or using nicotine products for at least two weeks before and at least one week after your procedure. These may slow your healing process and contribute to less than optimal graft growth.

FOODS: Please avoid foods with a large amount of herbs and spices at least 2 weeks prior to surgery. These tend to cause excess bleeding. Avoid grapefruit for 24 hours prior to and 5 days after surgery.

BIRTH CONTROL: Information for patients using birth control pills: certain antibiotics and other medications may neutralize the preventive effect of birth control pills, allowing for conception and pregnancy. Dr. Gabel advises patients on birth control pills to consult with their personal physician to initiate mechanical forms of birth control during the period of treatment and to continue those methods until advised by their personal physician that they can return to the use of oral birth control pills.

C. IN PREPARATION FOR YOUR SURGERY:

- It is advised but not required that you have an airplane "U" shaped pillow or clean bath towels, rolled in a similar fashion, handy for your comfort in sleeping and protection of the surgical area after surgery.
- It is best to leave your hair long in the back and on the sides so that it will cover the sutures or staples along your incision line after the procedure.
- Smoking must be stopped at least two weeks prior to, and at least one week after surgery. Nicotine
 patches and gum may not be used. THC products should also not be used four weeks prior to and
 after the procedure.
- You will receive the surgery paperwork by mail or by email prior to surgery. Please fill it all out prior to coming to the office, and send it back to the office. Please start several weeks ahead of time and review the checklist which will help prepare you for surgery. It is imperative that the paperwork be filled out ahead of time or this will delay things the morning of surgery. If you don't receive the paperwork ahead of time, please contact the office so we can resend it to you.

Two Weeks Prior to Surgery

- Review the medications / vitamins/ herbs section of this handout to avoid these 2 weeks prior to surgery
- If prescribed, continue to take Propecia (finasteride) before, during, and after surgery. You do not need to stop your Propecia (finasteride) as it does not interfere with any medicines I will use during surgery.
- You may continue Laser Therapy up to two days before surgery, and resume after surgery per Dr.
 Gabel
- Cut, color, and perm your hair 2 weeks prior to surgery, if desired.
- Confirm your accommodation arrangements for the night of surgery. Please check our website for recommended hotels which is the Hampton Inn which is about 1 block from the office.
- Arrange for a driver after surgery. You will not be allowed to drive yourself after the procedure, if narcotic medication is given to you or sedation is used.

- Please notify your driver that the outside building doors lock at 6:00 PM. If the team is in surgery, your driver will not be able to get in the building. You will be able to contact them when we finish the case so we can open the door and bring them into the office to take you home. Typically after hours, the patient will meet their driver at their car.
- Notify the office before taking any new types of medication prior to surgery.
- Start using Head & Shoulders Shampoo or Nizoral Shampoo on a daily basis. These help to optimize the microenvironment of the scalp prior to surgery.

One Week Prior to Surgery

- Review the medications / vitamins / herbs section of this handout to avoid
- Start taking Vitamin K, 100 mcg (1 tablet) daily. You may also take Vitamin C
- Avoid vigorous sports one week prior to surgery. Participation in these activities just prior to your procedure tends to increase bleeding.
- Get proper rest and nutrition.
- Stop drinking alcoholic beverages as they cause increased bleeding.
- Confirm your transportation to and from our office on the day of your procedure.
- If you have been sick during the week before the planned surgery, please call Dr. Gabel before surgery to discuss the appropriateness of going ahead with the procedure or not.
- Continue using Head & Shoulders Shampoo or Nizoral Shampoo on a daily basis. These help to optimize the microenvironment of the scalp prior to surgery.
- https://www.flowcode.com/page/gabelcenter
 - This is for your convenience to have all the instructions and contact information easily accessible. Bookmark this webpage on your phone. I have recommended that patients set this up as an app on their Home Screen.
 - This contains a lot of information including this instruction booklet, useful tips of the evening of surgery, information on the medications you may take home, and information on contacting Dr. Gabel after hours. Please have this at least bookmarked on your phone prior to arrival the morning of your procedure.

One Day Prior to Surgery

- Avoid excessive exercise and sweating (such as a sauna) the day before surgery, as they can dehydrate you and make you light-headed later. If you have been exercising a lot during the week before, be sure to drink plenty of fluids.
- Wash your hair, neck, ears, and face well the night before and the morning of the procedure with Head & Shoulders Shampoo. Lather for at least 3 minutes with the soap. If you wear a hairpiece or hair system, please make sure it is removed, along with any glue products, prior to your shower the evening before surgery and not replaced until after your procedure as instructed by Dr. Gabel. Please wash all makeup off your face the night before your procedure. Please remove all fingernail polish, coloring, and fingernail shellac. Remove any acrylic nails. This affects our oxygen reader.
- On the night before the transplant, get a good night's sleep.
- Fill out and complete the preoperative documents that we will mail out to you three weeks prior to
 your procedure. If you would prefer to have these documents emailed to you, you must let the
 office know.

- See information above about medications including beta blockers.
- Please prepare your food for the day. Please bring a lunch and snacks that you enjoy. We can
 certainly warm any food items up in our microwave oven. We used to provide lunch, but the
 delivery services have been unreliable and often made mistakes which resulted in the food not
 arriving on time.

Day of Surgery

- Congratulations your day has arrived! It is normal to have some anxiety.
- I recommend that you bring your spouse or partner at the beginning of the day when you arrive so they can help you with the overall plan and design of the hair restoration procedure.
- Wash your hair, neck, ears, and face in the morning of the procedure with Head & Shoulders Shampoo or Nizoral shampoo. Lather for at least 3 minutes.
- It is important to have a healthy meal prior to arrival at the office for your procedure. Do <u>not</u> eat any grapefruit or any foods with grapefruit in it 24 hours prior to surgery and for 5 days after surgery. Please avoid caffeine as this may raise your blood pressure. Decaffeinated coffee is okay to drink the morning of surgery. If you have any particular snacks, lunch items, or drinks that you prefer, please bring them as you will have plenty of opportunity to eat and drink throughout the day. If you are staying at a hotel, please prepare your breakfast items ahead of time as most hotels do not have any food items available at the time of your departure to the office in the morning. (If you are scheduled to have moderate sedation with an IV, do not eat or drink anything for 8 hours prior to your arrival.)
- Wear comfortable clothing and shoes the day of your procedure as you will be seated for several hours. Do <u>not</u> bring any valuables or wear jewelry/earrings to the office on the day of surgery.
- Please bring a button down or zippered shirt that can be easily taken off no polos. Do not wear any shirts that you have to pull over your head. Do not wear clothes that you should worry about getting soiled.
- Do not wear any makeup on the morning of surgery.
- Please arrive at the office <u>at the time noted</u> in your scheduling paperwork. Staff will be ready to greet you and immediately start the process of getting you prepared for surgery. If you are late, your surgery may be canceled.
- Do not take a beta-blocker for hypertension the morning of surgery you may take it at the end of the day.

Arrival at the Office

- Please arrive promptly at the designated time. Typically we have patients arrive at 6:30 AM. Of note, the building does not open until 6:15 AM so if you try to get in the building before that, the main building door will not open. If your designated time is prior to 6:30 AM, we will make arrangements to have the door open 15 minutes prior to your arrival time.
- Once in the facility, the staff will review your paperwork, medical history and confirm any allergies.
- Your vital signs will be taken, and your hair may be washed if you did not wash it in the morning.
- Dr. Gabel will review the planned procedure in detail with you.
- The informed consent will be reviewed, any questions answered, and paperwork signed.

• Preoperative medical photographs will be taken.

During the Procedure

- You will be comfortably seated and can listen to music, or nap.
- You may use the restroom or have a drink at any time.
- The office will set up your lunch. Please bring yourself a lunch and any snacks you desire to eat or drink throughout the day. We used to provide lunch in the past, but now the delivery services have been unreliable. Several times, lunch orders did not arrive correctly, or on time. This ensures you have food you enjoy and on time. We can certainly warm any food up that you bring.
- Remember Relax. You will be well taken care of. We have plenty of music to listen to during the procedure to help pass the time. The day actually goes by very quickly and we are ready to assist you at all times.
- Of note: you will <u>not</u> be able to bring your cell phone into the procedure room. Please make any prior arrangements as you will be off-line. You may check messages at lunch; otherwise we ask that you keep your phone in the locker.

Just After Surgery

- A light bandage or hat may or may not be applied depending on the area that was transplanted.
- We will go over postoperative instructions briefly after surgery to get you through the night until the next morning when you follow up with Dr. Gabel. The following day, we will go over the instructions in detail. Occasionally, patients are not seen the following day, and more detail will then be discussed.
- Your post operative appointment will be confirmed.

After Surgery Appointments

- The following day after surgery, you will have your scalp washed and the grafts examined. This check ensures the stability of the grafts and usually takes about 60 90 minutes.
- We will discuss the postoperative instructions in greater detail.
- You may drive yourself for the postoperative visit unless you are taking the narcotic pain medication.
- DO NOT DRIVE while taking the postoperative narcotic pain medications.
- If you plan to wear a hat after surgery please bring a few with you to the office on the day of your procedure. Dr. Gabel will help you select the most suitable fitting hat and instruct you on how to best put it on and remove it. Make sure the hat or bandana is CLEAN prior to using it.
- Your next post operative appointment will be discussed and confirmed.

D. ITEMS TO PURCHASE PRIOR TO SURGERY

Prior to surgery, please obtain the following items. I have included links to Amazon for reference:

- Ibuprofen 200 mg tablets
- Tylenol (Acetaminophen) 500 mg tablets
- Vitamin K 100 mcg tablets
- Polysporin Ointment (not Neosporin)
- Head and Shoulders or Nizoral shampoo for use preoperatively
- Revivogen Shampoo or a hypoallergenic, gentle shampoo. If you can find a fragrance free shampoo, that is also preferred.

E. TRANSPORTATION

You will not be able to drive yourself after surgery. Dr. Gabel may give you an oral medication for relaxation (Valium/Midazolam) or pain control (Oxycodone/fentanyl/meperidine) so please make arrangements for transportation to and from the office. When you arrive at the office, please provide the staff with the name of the person whom you have made arrangements with to drive you home. Following your surgery, the office will call the person to pick you up.

F. DEPOSIT AND PAYMENT

All patients must make a deposit at the time of scheduling. This deposit will be subtracted from the total amount owed. You will also have received a fee sheet outlining the estimated cost of the procedure. If paying with a personal check, the total estimated fee for surgery (minus the deposit) must be received at least one week before the procedure so that the funds can clear. Payment on the day of surgery is acceptable with a credit card, cash, money order or any type of certified check. If paying by credit or debit card, it is important that you call the card company and inform them that a significant charge will occur on the surgery day. Without a phone call, it is likely that the charge will not go through due to fears of fraud by the credit card company, and debit cards often have a \$3000 daily charge limit. Before surgery starts, we will collect the balance due.

We understand that unforeseen circumstances may arise in your schedule. Please note that regardless of the amount of notice that is given, a portion of the deposit is non-refundable. For further details, see the "Fee Schedule" form that was provided to you for a complete list of our office policies around cancellation and rescheduling. If you cannot locate this form, the office can send you a copy via email.

G. QUESTIONS

If you have any questions regarding the preoperative instructions, please do not hesitate to contact Dr. Gabel to have your questions answered.

POST-OPERATIVE INSTRUCTIONS FOR HAIR TRANSPLANT

Please follow all postoperative instructions. They will aid in your comfort and help promote the best possible healing and results. If you have questions regarding these directions, please call the office to have them answered. A transplant is a complex procedure with certain inherent risks. If you follow your doctor's advice and directions, the risk of complications in this procedure is small. Anything you do against your doctor's advice increases the chances of you having suboptimal results or complications. These instructions cover both strip harvest and FUE harvest patients - any differences will be noted. The terms "donor area" and "recipient area" are used often. The donor area is the area where the hair was removed. This is usually in the back of the scalp where an incision is made and sutures are placed, or the back of the scalp where the FUE grafts were removed.

A. DAILY CARE OF THE TRANSPLANTED AND DONOR AREAS

Care should be taken while cleaning the transplanted site during the week following hair transplant surgery because it is during this period that the healing mechanisms of your body secure the grafts firmly in place. Appropriate care of the recipient area will minimize crusting and make the transplant less noticeable and the healing more rapid.

Dr. Gabel recommends Shampoo after surgery (see items to purchase). Use this shampoo following surgery until it is gone. After this time, you may resume your own shampoo. Avoid dandruff shampoos for three weeks after the transplant.

1. Day 0: Evening of Surgery:

The most important concept the evening of surgery is to rest, relax, and do not touch or manipulate the grafted area. Sleeping may be challenging the first night. This is normal. See the section on "SLEEPING" for tips and recommendations.

Do not wash or wet your hair the night of surgery. Allow the grafts to heal in place. You may apply cold packs to your forehead and/or donor area in 10 - 15 minute intervals a few times prior to bedtime to help with your comfort and to reduce swelling.

After surgery when you leave the office, it is very important to have a good meal (dinner) and drink plenty of fluids.

Pain management: Take your medications as prescribed / as instructed in the office. Please be sure to take your medications with food, in particular any narcotic pain medication as these can easily cause nausea if taken on an empty stomach. The pain regimen is as follows: you will alternate ibuprofen 600 mg (3 tabs) every 3 hours with acetaminophen 500 mg (1 tab) every 3 hours. Do not exceed 3200 mg in one day of ibuprofen nor 3000 mg of acetaminophen in one day. Most people do not require this much medication to control their pain. You do not have to take this amount if you are not in pain - only take the medications if necessary. Acetaminophen (Tylenol) is a pain reliever and ibuprofen is a pain reliever/anti-inflammatory medication. If you were given a

narcotic (prescription) pain medication, that can be taken as needed for severe pain according to the instructions on the label. See section on pain management.

Be sure to take your antibiotic as prescribed as this will help to reduce the risk of infection. Do not take fish oil, aspirin, or aspirin containing medications for two days after surgery.

2. Day 1: Day after Surgery:

If you have a postoperative appointment arranged with Dr. Gabel, you may shower but do not wash or rinse your hair / scalp prior to arrival at the office. Use one of the shower caps to avoid water getting on the grafted area for your shower. In the office, our surgical staff will wash your hair for you and check over the transplanted grafts and donor area. After the appointment, you may spray the transplanted area with the Saline that you were provided with at the office to rinse off any blood which may accumulate, as directed by the staff and Dr. Gabel during your appointment.

If you do not have a post-operative appointment, remove the bandage and gently clean the <u>donor</u> area only, with shampoo and water. For the grafted area, spray with the large spray bottle provided until any blood or fluids that may have accumulated overnight on your scalp have been rinsed away. This may take an entire spray bottle. Do NOT allow the shower water to spray on the grafted area(s). After cleaning, apply a light layer of polysporin ointment to the <u>donor</u> area, where the hair was removed.

- For FUE harvest patients, apply a clean bandage to the <u>donor</u> area. This may be removed the following day, after which you won't need it anymore.
- For Strip harvest patients, you do not need a bandage.

3. Day 2-4:

Shower once per day. DO NOT ALLOW THE SHOWER TO SPRAY ON THE GRAFTED AREA and DO NOT RUB THE TRANSPLANTED GRAFT AREA EITHER. Add a dime size amount of shampoo to a plastic cup and fill the cup with warm water. Pour this soapy mixture over the transplanted area and repeat a few times to clean the transplanted area. Shampoo the rest of your hair as you normally would, avoiding the grafted area(s) and gently massage the donor area at the back of your scalp as well to remove any build-up of secretions from the wound and ointment from previous applications. Following this, use the **plastic cup** to thoroughly rinse your hair/scalp with plain, warm water.

If needed, you may use the large spray bottle, given to you, to spray the grafted area in order to remove any dried blood/secretions. It is imperative that the scalp and donor area are clean and free of blood or scabs for proper healing.

After thoroughly cleaning the transplanted and donor areas, apply a thin layer of Polysporin ointment to the donor area so that it lightly covers the sutures, staples, or FUE donor sites. Blot your hair with a towel (or allow it to air dry) and brush hair in the back of the scalp gently, being careful to avoid catching the bristles on the sutures/staples. Do not rub your hair dry. This may dislodge the grafts. The hair may be blow-dried using a cool

setting.

Day 3: If you notice that your scalp is getting dry, you may apply a light layer of coconut oil to your scalp starting on Day 3. The best way to apply it is to take a small cloth, pour coconut oil in it, and gently dab your scalp to apply a very light layer of oil to your scalp. You can do this 3 to 4 times a day to help with the dryness. Sometimes if you have some itching of the scalp, that is due to the dryness and applying coconut oil will help that.

4. Day 5 - 6:

Continue to wash your hair/scalp, once a day using the following method. Lather shampoo in your hands until a foam develops. Gently pat the foamy lather over the grafts in the recipient area. Allow this lather to sit on the scalp for a few minutes while you shampoo the rest of your hair. Gently massage the donor area at the back of your scalp as well to remove any build-up of secretions from the wound and ointment from previous applications. Rinse by pouring warm water from a plastic cup over your head. Alternatively, you may allow the transplanted area to be sprayed with a low pressure/gentle shower spray but do not rub the transplanted area.

After thoroughly cleaning the transplanted and donor areas, apply a thin layer of Polysporin ointment to the donor area so that it lightly covers the sutures, staples, or FUE donor sites. Blot your hair with a towel (or allow it to air dry) and brush hair in the back of the scalp gently, being careful to avoid catching the bristles on the sutures/staples. Do not rub your hair dry. This may dislodge the grafts. The hair may be blow-dried using a cool setting.

LINES AT RECIPIENT AREA: Please be aware that some patients will start to notice areas that look like lines in the transplanted area around this postoperative time period. These areas of demarcation are due to the formation of crusting and will diminish as you begin the soaking process described in the following section.

5. Day 7 - 14:

Starting on Day 7, once a day, fill the bathtub with warm water. Lay back and allow the transplanted (recipient) area to soak in the warm water for 20-30 minutes. Alternatively, you may wet your head in the shower, every few minutes with a low pressure shower stream or by pouring warm water over your head from a plastic cup. Keep your head wet for 20-30 minutes. The crusts (dry skin) associated with the transplanted hairs will become white, plump, and soft. After soaking, while the crusts are wet & soft, gently shampoo the transplanted area to begin removing some of the crusting. You may use the pads of your fingers to gently massage the area so the crusts get dislodged. By day 10, you can get more aggressive so all the crusting is removed, which by day #10, it should be. By day #12, all the crusting should be gone and the little transplanted hairs should be seen. If you have crusting still at day #12, you are not being aggressive enough with the washing/massaging. As noted below, the transplanted hairs may begin to shed at this time. It is normal to see short hairs come off your scalp with the dry skin crusts while shampooing. As long as there is no bleeding, this is not a cause for concern. You

will continue this process of soaking followed by washing, once a day until all crusting is gone and all that can be seen are the short transplanted hairs. It may take a few days to get all of the crusting (dead skin) off. Don't rush it, but by day 10, your scalp should be free of any crusting. DO NOT PICK OR SCRATCH THE GRAFTS, as this may dislodge the grafts. You can expect your scalp to be a little red after the crusts come off. This is normal. That redness will subside over the next few months.

Once all the crusting is gone, you no longer need to soak the recipient area, simply shampoo gently once per day and apply Polysporin ointment as follows:

- Strip Harvest Patients: Continue to apply a light layer of polysporin ointment to the donor area for two days after your sutures are removed or for a total of 12 days following surgery.
- FUE Harvest Patients: Continue to apply a light layer of polysporin on the donor area until the FUE sites are healed usually about 7 days.

IMPORTANT: At 1-4 weeks post-op, you can expect that some transplanted hair will begin to shed. This is a normal process and should not be a concern as all the transplanted grafts will shed during this time.

6. Day 14 +

By 10-14 days after surgery, the grafts will be completely healed in place. Starting two weeks after surgery you may return to your normal hair washing / styling routine. Avoid any products or habits that may be harsh on the scalp or hair like dandruff shampoo or hair dye until 3 weeks after the procedure. After three weeks there are no restrictions in regard to haircare or styling. You may start using your regular shampoo. You may notice that your scalp gets dry easier after surgery, especially at the donor zone. You may add a moisturizer or conditioner which will help with that. For FUE patients, there are no restrictions on activity after 14 days. For linear donor strip harvest patients, just be careful and not to "stretch" the area of the linear incision. You need to be careful for about a month.

B. BANDAGES

You will go home with a "wrap around the head" bandage. Follow the above instructions on when to remove the bandage. If you feel the bandage is moving up your forehead and getting close to the recipient area (grafts), remove it. If you feel the bandage is too tight, then use a pair of scissors and cut a slit in the bottom half of the bandage that goes around your forehead - that will release some of the tension.

C. PAIN

In most cases, there is usually only minimal discomfort after a transplant procedure - even after a large number of grafts have been placed. Occasionally, some patients will have a significant headache – most commonly in the donor area. You will be supplied with some of the medications to relieve the pain. Do not drive, operate machinery, sign documents or make any important decisions while taking the prescription pain medication.

We recommend <u>alternating</u> Ibuprofen and Acetaminophen every 3 hours to help control pain. The best strategy

for controlling pain after surgery is around the clock pain control with Tylenol (acetaminophen) and ibuprofen. Alternating these medications with each other allows you to maximize your pain control. I also recommend writing down when you took the medications to help keep track of which medication you used at which time.

- 1. Ibuprofen 200 mg tablets: 3 tablets every 6 hours
- 2. Acetaminophen 500 mg tablet
- 3. Alternate Ibuprofen and Acetaminophen see example below
 - a. 12:00 PM: Acetaminophen 500 mg
 - b. 3:00 PM: Ibuprofen 600 mg (3 pills of 200 mg)
 - c. 6:00 PM Acetaminophen 500 mg
 - d. 9:00 PM Ibuprofen 600 mg (3 pills of 200 mg)
 - e. Continue to alternate Ibuprofen and Acetaminophen every 3 hours
- 4. Most patients require the above regimen for only the first night or part of the day after surgery. Hair restoration surgery is not painful after the first night, and in many cases, patients only need very little pain medication on or after the first day. The above regimen is the maximum recommended.
- 5. Oxycodone 5 mg tablet this is only to be used if your pain is not controlled with the above regimen: 1 or 2 tablets every 6 hours as needed for severe pain. Oxycodone is not routinely given for the FUE donor harvest method, only the strip harvest method. Most patients do not need to take these if they follow the above regimen.
- 6. After a few days from the surgical procedure, you may experience bouts of pain or discomfort. This is normal as the deeper tissues are healing and forming a scar. I recommend massaging the area, or using ibuprofen which will help alleviate the pain. It is rare for people to experience long term pain after hair restoration surgery.

IMPORTANT

Do not take more than 3000 mg of Tylenol (acetaminophen) or 3200 mg of ibuprofen in a 24-hour period.

D. BLEEDING

It is normal to have some light drainage from the transplant and donor sites the evening of the procedure. You may want to place an old pillowcase or towel on your pillow the night following your procedure. Do the following if you notice continual bleeding from the transplant or donor site: Apply steady, firm pressure with a gauze pad over the area for 15 minutes without lifting the pad during that time period. If the bleeding continues, notify Dr. Gabel through the answering service by calling 503-693-1118.

E. SLEEPING

To reduce facial swelling, sleep with your head elevated approximately 10-20 degrees for the first 3-5 nights following the procedure. An airplane "U" shaped pillow or rolled up towels placed behind your neck and over your shoulders will help to keep your head in a central position and may support your neck more comfortably while sleeping. You may want to use a recliner chair or several pillows, but the goal is to be comfortable and not to allow anything to rub against the grafted area. It is OK to rest the donor area on pillows or towels.

F. SWELLING

Some patients have puffiness or swelling over the forehead at about the third or fourth day, which usually only lasts for two to three days. It may even spread down to around the eyes and nose causing significant, temporary swelling around the eyes. Apply cold packs two to three times a day for 15-minute periods to the forehead and temples for at least 48 hours following the procedure to minimize swelling. Plastic bags of frozen peas work well for this. Avoid foods that have high sodium content. Salty foods will aggravate any swelling that may occur. Do not allow the ice packs to touch the newly placed grafts at the recipient sites. Most of the swelling should resolve by day 6 or 7 after surgery.

* Call 911 for any swelling of the mouth, lips, or tongue that is making breathing difficult

G. INFECTION – TO AVOID INFECTION:

Take the antibiotics as directed by Dr. Gabel. Clean your scalp and transplanted area before and after surgery as directed in this booklet. For the first week, avoid dirty environments, heavy lifting, or sporting activities that cause you to perspire. If you notice that the grafted area continues to be a dark red, or you see areas of pustules, call Dr. Gabel immediately. If you are out of town, be prepared to take a photograph of good quality and send it to Dr. Gabel so he can evaluate the area.

Swelling and/or tenderness in the sutured area may be a sign of an infection. Fever and/or chills are also indications of infection as well. If these conditions occur, please contact the office. It is normal in the first 5 days after surgery to feel a little warm.

H. PHOTOGRAPHS BY THE PATIENT

We have a considerable number of out of town guests that come to the Gabel Center for their surgery. We encourage patients to stay for at least 2 to 4 days afterwards so we can examine the donor and recipient areas to make sure they are healing well. When patients return, Dr. Gabel requests that patients send photographs of the recipient site and donor site. Please take close up views that are clear to visualize. Many times the photos are blurry and Dr. Gabel is unable to see the respective areas. Please take several photos of all the portions of the donor and recipient areas. Please upload them using this secure link. Dr. Gabel will receive a notification that photographs have been uploaded to the system. He will then be able to view them and put those photos in the patient's chart.

I. HEALING

The transplanted area should not be exposed to prolonged, direct sunlight for three months. You may use a hat to cover the transplanted area. Be careful putting the hat on and taking it off so it does not rub the transplanted area. Please ask the staff and we will demonstrate how to do this.

Avoid the use of hairpieces unless absolutely necessary for 21 days after surgery. If you plan to wear these, let us know so we can instruct you on proper positioning. Please only use these if they are very clean.

Immediately after surgery, you should take it easy. The best thing to do is to sit in a comfortable lounge chair and read, watch TV, or nap. Try to keep your head upright during the day. It is important not to exert yourself for at least two weeks after surgery.

Refrain from alcoholic beverages for one week or while you are on any medications prescribed by Dr. Gabel.

Refrain from using aspirin and/or related drugs for one week. Tylenol is an approved medication before and after the procedure. The day after the procedure, you may go back to taking all your regular medications.

J. COMBING

Avoid combing or brushing over the grafted/recipient area for seven days, and after that be very careful not to catch the comb on the grafts. The donor area in the back can be combed immediately after surgery. If you had sutures placed, be careful not to get the comb tangled with the sutures.

K. SUTURES/STAPLES (STRIP HARVEST PATIENTS ONLY)

Sutures or staples will be removed in 8 - 12 days following surgery. Your appointment should be made and confirmed prior to leaving the surgery center. If you are an out of town patient, please arrange to have the sutures or staples removed around 10 days after surgery, or as directed by Dr. Gabel. It is very important to keep the area clean as directed above. If dissolvable sutures were used for your procedure, they will dissolve on their own and will not need to be removed (however, sometimes even the dissolvable sutures have stayed longer, and need to be removed).

Some patients have a partner that can remove the staples. We can provide you with a staple remover - please ask for that. I have made a video that shows how to remove the staples. <u>Here is a link to that video</u>. Please have the staples removed in the following schedule:

- 9 days after surgery: Remove every 4th staple
- 11 days after surgery: Remove half remaining staples
- 13 days after surgery: Remove all remaining staples

L. AVOID FLEXING YOUR HEAD DOWNWARD (STRIP HARVEST ONLY)

Flexion of your head downward puts additional tension on the incision line and may cause a larger scar. Keeping your "chin up" will help avoid the extra tension and help minimize the scar. I recommend this for about two months until the incision has completely healed. Don't be afraid to flex your head; just minimize putting your chin to your chest.

M. NUMBNESS

You will most likely experience numbness at and around the area that has been transplanted. Sensation will begin to return in approximately six to eight weeks following surgery, but may last several months.

N. CRUSTS

The crusts will fall off in about one to two weeks. Do not pick them off. Following the cleaning instructions will help minimize prolonged crusting.

O. TEMPORARY HAIR LOSS (SHOCK LOSS)

Temporary hair loss or shock loss may occur along the incision line or other areas of the scalp including the recipient area if hair existed in that area. This is due to the irritation of the hair root from the surgical procedure. Hair growth will start to return around 3 to 4 months after, the same time the grafts should be starting to grow. The degree of shock loss varies from patient to patient - some people do not shock or lose hair while others have a significant amount of shock loss. It is impossible to predict, and Dr. Gabel is sensitive to this and will do everything he can to help minimize shock loss. The most important concept to remember is that this is a temporary loss, and the hairs will return.

P. LOSS OF TRANSPLANTED GRAFTS

The grafts take about two weeks to completely implant in the scalp. It is important not to bump or rub your head for the first 2 weeks as this could result in loss of the transplanted grafts. If you do bump your head, and it does not bleed, chances are no grafts were lost; if you have significant bleeding, then grafts may be lost. After 2 weeks, the grafts are fully anchored and can not be dislodged easily. You will also see that the hairs will be shedding around this time.

Q. REDNESS TO SCALP AFTER SURGERY

There may be a red hue to the scalp at the transplanted site. This will resolve over time - sometimes it may take 3 months to resolve. This is completely normal, so please do not be concerned. If you have progressing redness accompanied with pain during the first week, notify Dr. Gabel immediately as this may be a sign of an <u>infection</u>. If you do have persistent redness, call the office and Dr. Gabel may be able to offer a solution to help diminish the redness.

R. ITCHING

You may experience some itching either in the transplanted area or in the donor area following hair restoration procedures. In general, itching is part of the healing process and should not be a cause for concern.

A common contributing factor may be dryness. Keep Polysporin ointment on the incision site and apply a very light film of Aquaphor spray daily to the grafted area starting 4 days following the procedure for moisture. If the itching at the donor site is bothersome to you, purchase Hydrocortisone Ointment 1% in 30 gram tubes which may be bought over the counter. This medication must be in an Ointment form, not a cream. This may be applied to the donor (incision site) areas that itch, as needed, up to three times a day. Do not apply to the grafted area.

DO NOT SCRATCH THE SCALP as this may dislodge grafts. You may also experience itching as the new hairs grow in.

S. ACTIVITIES

The day after your hair transplant, take it easy. You will be tired from the surgery and the medications received. If possible, spend this day at home, or in a comfortable place, and concentrate on showering properly and following the post-op instructions. Abstain from sexual activities and alcohol for FIVE days after the procedure. If possible, it is best not to resume for at least 1 week after surgery, if not longer for better healing. weeks.

Important: Do not drive, operate dangerous machinery, or make important decisions until you are fully awake and off the narcotic pain medications. If Dr. Gabel gave you medication for pain control or relaxation either during or after the procedure, the recommended minimal amount of time prior to these activities (driving, operating machinery, or making important decisions) is 24 hours after your last dose, but it may take longer until you are fully awake.

T. EXERCISE

The concern with exercise is three-fold. First, you want to keep the transplanted area clean and not exert pressure on the scalp which may dislodge the grafts. Secondly, the donor area is healing. Straining or stretching the back of the neck may predispose to a wider scar, and should be avoided. In general, exercises such as sit-ups (especially with your hands clasped behind your head), squats, or bench presses will strain the back of the neck and should be avoided for at least 4 weeks post-op. Lastly, you don't want to sweat on the donor or grafted areas as this may cause an infection.

You may begin light exercise about 10 days after surgery. Exercises such as walking up an incline, lifting very light weights, and isolated leg exercises may be started within a few days after your procedure, if you feel up to it. You may perform limited low stress daily activities and easy exercise for the next 14 days. Since the impact of exercise will vary greatly from person to person, "cookbook" recommendations are not possible. If you do perspire at that time, immediately shampoo and clean your scalp. At 14 days after surgery, there are generally no restrictions in exercise if you had the FUE donor harvest method. If you had the strip donor harvest method,

you may exercise after 14 days being cognizant not to feel pulling of the back of your scalp. If the back of the neck feels tight after 4 weeks, or if you tend to heal with wide scars, these activities should be avoided for 2 months.

Remember, the donor wound will not regain its full strength for at least 3 - 6 months after hair transplant surgery, so a reasonable degree of caution should be exercised during this period. You must use your own good judgment and call us if you have questions.

U. SUN

Please avoid unprotected exposure to sunlight for 3 months. Wear a hat when you are going to be outside for a prolonged period of time (greater than 20 minutes). The staff will show you how to put on and take off the hat to minimize any risk to the transplanted grafts and sutured area. After three weeks, you may apply a strong sunscreen with SPF of 15+ to the transplanted area.

V. TIMELINE FOR GROWTH OF TRANSPLANTED HAIRS

Remember, new hair growth will not start growing for at least three months. Prior to this, the transplanted hairs will shed around 3 weeks and the grafted area will look bare - almost like no grafts were placed in the area. This is expected. Be patient during the growth process. The grafts will start growing again around 3 months after the procedure. By 6 months, you should see growth of the transplanted grafts. Some people are late growers, but for the most part, over 90% of people see growth at 6 months. It takes a full year to achieve about 90-95% of the cosmetic result from the procedure, and about 1 and ½ years for the final result, 100% growth. There have been case reports of over 18 months for 100% growth. Please be patient - it takes time. Some people say that the hardest part of the procedure is waiting for the final result. The outcome will be well worth the wait. Please see the website for a more in depth discussion and illustration of the growth timeline.

W. CYSTS

Two months after surgery, you may develop a small, swollen "cyst" under one of the graft sites (usually 2-3 months after the transplant). This is not uncommon after hair transplant surgery; virtually everyone will develop a few pimples in the recipient area starting at about a month following hair transplant surgery and continue for several months. This happens because the new hairs are trying to break through the skin. They occasionally can be confused with a true infection, but pimples tend to resolve on their own in 3-4 days. They generally do not require treatment. Larger pimples can be unroofed by removing the thin top layer of skin with a sterile needle, and then any fluid can drain. If more than just a few develop at one time, or the skin in a larger area becomes swollen, red, tender, and hot, then you should call the office immediately as antibiotics or drainage by the doctor may be necessary.

X. HATS

Patients may use hats after surgery without restrictions after 2 weeks. Prior to that, if one wants to use a hat, it is important that it is loose fitting and does not rub on the grafted (recipient) area. I recommend that people wait at

least 5 days prior to using a hat. If needed, please bring in the hat(s) that you would like to use, and I or the staff will show you how to put the hat on and take it off. The technique I discuss with patients is one that does not disturb the grafted area: if we placed grafts in the frontal area, then I recommend putting the hat on and engaging the hat in the front, and pulling it down the back. If one had the crown transplanted, then put the hat on so it does not rub the crown grafts, and pull it over the frontal aspect of your scalp.

Please bring in your hats and we will show you how to put them on and off. Also, the hats must be cleaned daily. I have had patients develop a localized infection from using a dirty hat.

Y. MISCELLANEOUS INFORMATION HELPFUL FOR PATIENTS:

- The hair that we transplanted goes into a "rest phase" and will not start to grow for about three to six months. Some hairs may take off and grow from the start, but these are the exceptions. We usually like to see our patients at 6-months following surgery. At that visit, Dr. Gabel will evaluate the transplanted area and donor area for any cysts or problems. Remember: it takes about 1.5 years to obtain the final results and the hairs may just be starting to grow at the 6-month visit.
- When the small scabs from the transplanted grafts fall off, the short bristly hairs that are in the scab usually fall off also. This does not mean that you have lost that hair or that graft unit.
- It is important to keep your scalp clean in the weeks and months following surgery to allow the new hairs to come through the skin. Remember that you can shampoo as you normally have done three weeks after surgery.
- Some patients develop dry/flaky skin at the donor sites a few weeks or months after surgery. I have recommended either a moisturizing shampoo, or Head & Shoulders Shampoo. If that does not resolve the issue, contact Dr. Gabel's office.
- When the hair starts to grow, the patient will notice that it comes out "frizzy." That is normal. This occurs because of the microscars in the skin from the small incisions that were made to insert the hair grafts. As these soften up, the "frizzy" hair will straighten out to the normal curl of your hair.
- If this is your second transplant session, please remember that the results will not be quite as dramatic as with the first session. This is because the hair from the first session mixes in with the newly transplanted hair and is not as easily recognized as "new" hair. Secondly, the first session has the advantage of hair appearing out of nowhere or mostly balding skin which gives it a more dramatic effect.
- If you are planning on using a hairpiece after surgery, I ask that you keep it off as long as possible (at least 10 days), and make sure when you do apply it, it is very clean each time. I have had patients develop infections after the use of a hairpiece.
- The medication used during your surgery may still affect you for 24 hours following surgery. Effects may be sleepiness, disziness, disorientation, nausea, vomiting or skin discoloration of the treated area. If you should feel any of those symptoms, we recommend an adult companion to remain with you for 24 hours.
- If you were using minoxidil (Rogaine®) prior to surgery, you may start it 2 days after surgery. Do not apply it on the newly implanted grafts find a location on the scalp that was not transplanted and apply it there. If you were on oral minoxidil, you can start that 2 days after surgery.
- Call 911 for any swelling of the mouth, lips, or tongue that is making breathing difficult

- Report any of the following
 - o Post-operative nausea or vomiting that is not controlled by anti-nausea medication
 - o Pain that is not relieved after taking the maximum dosage of your pain medication
 - o Bleeding from the surgical site that will not stop with gentle pressure for 5 minutes
 - o A fever above 101.5 degrees within 7 days following your surgery
 - o Signs of infection at the surgery site, such as increased redness, swelling or pain, yellow/green drainage, or site feeling warm to touch.
 - o A rash and/or itching anywhere on the body
 - o Unable to pass urine within 8 hours of discharge
 - o No bowel movement by the end of 3 days following surgery

Z. QUESTIONS

If you require medical help related to the hair transplant, call the office (503-693-1118) and you will be connected to Dr. Gabel or the physician on call who will direct your care. For any questions or concerns not covered in these instructions, please call the office.

FREQUENTLY ASKED QUESTIONS

When can I take a shower?	You may shower at any time. Immediately after surgery, make sure that the surgical areas are covered so water does not touch the surgical site. After that, follow the instructions above on how to care for the grafted area and the donor area.
When can I start working out?	Please refer to Activities and Exercise above.
When can I start drinking alcohol?	Once you are off your antibiotics and pain medications (narcotics), you may resume drinking alcoholic beverages.
I live out of town. How many days should I stay in Portland?	I highly recommend patients stay in town for at least 2 days, if not longer, until they are comfortable taking care of the grafted area and donor area. The staff will be cleaning and checking over the surgical sites to make sure all the grafts are in the proper position when patients visit in the postoperative period. We provide detailed instructions when patients are in the office on how to care for the surgical areas. Once the patients are comfortable taking care of the surgical areas, and there are no signs of any problems, it is OK for patients to return to their hometown. If patients have sutures or staples to be removed, patients need to plan ahead and have those removed between postoperative days 9 to 12.
How long does it take for the hair to grow?	The final results of a hair transplant are not realized for about 1.5 years. About 90% of the hair will be growing by 1 year, but I've seen it take longer. This is the time for patience.

I noticed some of the hair shafts	This is expected. After the hair transplant, the hairs go into a shock phase
coming out after the first week?	where the hair shafts come out. If you do not notice any bleeding, that means the follicle is intact and everything is proceeding normally.
What can I eat after the procedure?	Immediately after the procedure, I would not eat very spicy foods - you want to drink plenty of liquids and eat food that you commonly eat that does not upset your stomach. The following day, there are no restrictions on the type of food you may eat. You should avoid alcohol while on antibiotics and pain medications.
When can I resume all my medications?	You should have received a medical reconciliation form when you left the office. If you have questions about this, contact Dr. Gabel and he will discuss when you can resume your medications.
Is the hair transplant procedure painful?	The only discomfort patients feel is when Dr. Gabel administers the anesthetic or numbing shots. After that, patients should not feel any pain. It is important that patients notify Dr. Gabel if they are experiencing any discomfort as he will then numb the area again.
How do I contact the office after hours?	Call the office at 503-693-1118 and the prompts will allow you to reach Dr. Gabel after hours.
Do I need to eat breakfast before my hair restoration surgery?	It is important to eat breakfast before surgery. It is a long day, and the stress from surgery will make your body need additional stores of energy. So please eat before coming to the office before your surgery.
I have the donor strip harvest procedure and Dr. Gabel put staples to close the wound. Is it possible for me to take the staples out, and when do I do that?	Dr. Gabel will use either staples or sutures to close the incision when he harvests the donor hair with the linear strip incision. Removing staples is very easy. He always recommends someone with knowledge to remove them; however, many patients have a partner who is able to do it. He has made a video showing the technique. Here is a link to that video.
	He recommends the following schedule to remove the staples: • 8 - 9 days after surgery: Remove every 4th staple • 10 - 11 days after surgery: Remove half remaining staples • 12 - 13 days after surgery: Remove all remaining staples
What is the approximate time that I will return the day after surgery for the scalp to be cleaned and checked?	Typically, we have patients return in the morning to have the scalp washed, and we will check all the grafts to make sure they have not been dislodged and are still in proper position. We will also review all the instructions so you know exactly how to care for the recipient and donor areas.
Do I really need to stop drinking alcohol 7 days prior to surgery?	Yes: any alcohol intake will cause increased bleeding. If we have increased bleeding during the procedure, it is more difficult to extract and place the grafted hairs.
I am noticing my scalp is getting dry and itchy. Is there anything I can do?	You may apply coconut oil to the recipient area which will help moisture it. Use a Q-tip or cloth to gently apply the coconut oil. Do not rub it into the grafted area - just blot it. You may do this several times a day.

I can't find the Revivogen. Is there				
any other shampoo I can use?				

Yes: I recommend any high quality, sulfate free shampoo. The purpose of the shampoo is to keep the area clean. Do not use a harsh, abrasive shampoo - find a high quality one which will work fine. Do not use baby shampoo.

MEDICINE / VITAMINS / HERBS TO AVOID BEFORE SURGERY

Please be sure that you have informed Dr. Gabel of all medications that you are currently taking, especially Coumadin, Plavix or Aspirin. Bring a list of all your medications, and the dosages of each. This will be placed with your paperwork and permanent chart.

Minoxidil (Rogaine®) should be discontinued 2 weeks prior to surgery.

If you are a woman and currently taking high dose birth control pills these should be discontinued 2 weeks prior to your transplant as well. Please have this approved by your primary care physician.

Stop taking ALL natural products, herbal medicines, vitamins, and other supplements 7 days before your surgery. They may be resumed when your doctor says it is OK.

In the case that you do need something for pain or fever within this 2 week time period, plain Tylenol is the only acceptable medication that can be used right up to the day of surgery.

If you have any questions or concerns regarding discontinuing your medications or if one of your medications is not listed and you are unsure of whether or not it should be discontinued, please contact the office. Additionally you should inform the office of any changes or new medications you begin taking.

Dr. Gabel wants you to stop taking aspirin, aspirin-like products, or non-steroidal anti-inflammatory agents 2 weeks before surgery unless otherwise advised by Dr. Gabel or your primary care physician. You must have your primary care physician or cardiologist approve any discontinuation of prescribed medications. The medications to stop include all aspirin products or nonsteroidal anti-inflammatory medications including but not limited to:

Aspirin **Ecotrin** Ibuprofen Baby Aspirin Advil Vitamin E

Bufferin Motrin Many over the counter cold

Excedrin Aleve

Also included are any vitamins and herbal supplements or preparations including but not limited to:

chondroitin glucosamine agrimony alfalfa horse chestnut clove aniseed cod liver oil horseradish arnica coltsfoot licorice artemisia dandelion meadowsweet asa foetida danshen (salvia) melatonin bishop's weed melilot devil's claw bladderwrack dehydroepiandrosterone (DHEA) nattokinase bochu dong quai (angelica) Multi-vitamins bogbean fenugreek Fish oil feverfew boldo Echinacea bromelains fish oil **Ephedrine** flax seed Garlic burdock capsicum gamma linoleic acid Ginkgo cassio Ginseng garlic celery seed ginger Kava chamomile St. John's Wort

ginkgo Chinese wolfberry Valeria The "natural products" listed below may be beneficial for a variety of ailments, but THEIR USE AROUND THE TIME OF SURGERY MAY NOT BE DESIRABLE. Therefore, it is advisable to stop taking these products to avoid problems with surgery and anesthesia. If time permits, discontinue the use of these products TWO WEEKS *prior to* surgery and TWO WEEKS *after* surgery. Specific nutritional supplements that should be discontinued include:

Bilberry (*Vaccinium myrtillus*) ~ Contain anthocyanosides, flavonoid compounds that improve visual acuity and are important in the treatment of eye disorders. Excellent antioxidant that strengthens capillaries and collagen. Has antiplatelet activity and may inhibit clot formation.

Cayenne (Capsicum annuum) ~ used for GJ tract disorders. Overdose may cause severe hypothermia.

Dong Quai (Angelica sinensis) ~ The main application is in the relief of menstrual disorders and menstrual cramps. Often used to relieve menopausal symptoms. Active constituent is coumarin derivatives, which may potentiate existing anticoagulant medications.

Echinacea (*Echinacea angustifolia*) ~ Immune system stimulant with anti-inflammatory, antiviral, and antibacterial effects. Used as a prophylaxis for upper respiratory infections. Use of echinacea may impact the liverwhen general anesthetic or certain other medications such as anabolic steroids or methotrexate are used.

Feverfew (*Tanacetum parthenium*) ~ Used for migraine headache prevention and for arthritis, rheumatic disease, and allergies. May increase bleeding, especially in patients taking certain anti-clotting medications.

Fish Oil Capsules ~ Supplies important omega-6 fatty acid, DHA, and EPA, used to reduce cholesterol and triglyceride levels. Has blood-thinning properties.

Garlic (Allium sativum) ~ Garlic has vasodilatory, hypocholesterolemic effects, and antiplatelet effects. May augment effects of coumadin, warfarin, and NSAIDs, causing abnormal bleeding time.

Ginger (*Zingiber officinale*) ~Useful as antispasmodic, anti-inflammatory, and antinauseant. Prophylactic for motion sickness and used to stimulate appetite. Useful for postoperative emesis. Use of ginger may alter bleeding time. Ginger may interfere with cardiac and anticoagulant medications.

Ginkgo Biloba ~One of the oldest living tree species which can live up to 1000 years and grow to a height of 120 feet. Used as an antioxidant and circulatory stimulant. Used for treatment of intermittent claudication, tinnitus, vertigo, memory enhancement, and sexual dysfunction. Anticoagulant activity is 3x's stronger than vitamin E.

Ginseng (*Panax ginseng Panax quinquefolius*) ~ At least 3 different varieties: Asian, American, and Siberian. Improves physical and cognitive performance, mood, or metabolism. An adaptogen and an antioxidant. Anticoagulants that may interact with cardiac, hypo/hyperintensive medications and hypoglycemic agents.

Hawthorne (*Crataegus laevigata*) ~The extract is used for its ability to potentiate the action of cardiac glycosides. Used in the treatment of ischemic heart disease, hypertension, angina, and chronic congestive heart disease. Potentiates the actions of digitalis and other cardiac glycosides.

Kava Kava (*Piper methystlcum*) ~ Sedative. analgesic, soporific, anticonvulsant, muscle relaxant, anxiolytic. Similar to the effects of benzodiazepines in treatment of anxiety. May potentiate CNS effects of barbiturates, alcohol, antidepressants, antipsychotics, and general anesthetics.

Licorice Root (*Glycyrrhiza glabra*) ~ Used for gastric and duodenal ulcers, gastritis, and cough/bronchitis. Gly- cyrrhizic acid in licorice may cause high blood pressure, hypokalemia, and edema.

Ma Huang (*Ephedra sinlca*) ~ Used in weight loss and energy products; a natural amphetamine with powerful stimulant effects. More than 800 adverse reactions reported with the FDA. Causes hypertension, tachycardia, cardiomyopathy, and cardiac dysrhythmias.

Melatonin ~ A hormone secreted by the pineal gland. Regulates many other hormones that are involved in controlling circadian rhythm. Used for jet lag, insomnia, and SAD (seasonal affective disorder). May potentiate CNS effects of barbiturates and general anesthetics.

Red Clover *{Trifolium pratense})* ~ Used to relieve menopausal symptoms. Active constituents include coumarin derivatives, which may potentiate existing anticoagulant medications.

St. John's *Wort* (*Hypericum perforatum*)~ Herb used as mild antidepressant, sedative, anxiolytic. May have a monoamine oxidase (MGA) inhibitory effect. Can interact with MAG inhibitors and other antidepressants. Many other drug interactions were reported.

Valerian (*Valeriana offlcinaiis*) ~ Used as a sedative, hypnotic, and antispasmodic in the GI tract. Relieves anxiety, nervousness, and insomnia. May increase effects of sedative hypnotics.

Vitamin E ~ Important fat-soluble vitamin that acts as an antioxidant and prevents the oxidation of polyunsaturated fatty acids. Used in the prevention and treatment of cardio- vascular disease, cancer, age-related degenerative diseases. Anti-clotting benefits can prolong bleeding time.

Yohimbe (*Corynanthe yohimbe*) ~ "Natural Viagra" that has MAG effects. Yohimbine is the agent extracted from the bark of the yohimbe tree. The tree grows in the African nations of Cameroon, Gabon, and Zaire. Purported to have both psychological and physical effects. Increases the potency of anesthetic

SUMMARY OF POSTOPERATIVE CARE INSTRUCTIONS

Post Op	Medications	Shampooing	Soaking	Cold Compresses	Polysporin Ointment/Coconut Oil	
Day					FUE	Linear Strip (FUT)
0 (Surgery)	Tylenol/Ibuprofen: Alternate Ibuprofen	Do not wash your hair/scalp after surgery		Day 1 - 3: Apply to forehead and donor area for	Polysporin ointment will be applied to the donor area in the office.	Polysporin ointment will be applied to the donor area in the
1	600 mg and Tylenol 500 mg every 3 hours as needed for pain	You may shower, but do not wash your hair/scalp. We will wash it for you in the office.				office.
2	Antibiotic: Take as directed	Day 2 - 4: In a plastic cup or spray bottle, mix shampoo with warm water and pour/spray over		10-15 minutes, 2-3 times per day as needed	Day 2 - 7 Donor area Apply a layer of	Day 2 - 12 Donor area Apply a layer of
3	Oxycodone: Take as directed if provided	the grafts (recipient area). Wash the back and sides of your scalp with gentle pressure. DO NOT rub the grafted area. Rinse by pouring warm water from a plastic cup over your head. Day 5 - 6: Lather shampoo in your hands and pat the lather over the grafts in the recipient area - allow it to sit for a few minutes before rinsing. Rinse by pouring warm water from a plastic cup over your scalp. Day 7 - 13: First, follow instructions for soaking. After soaking, shampoo the transplanted area, rubbing the grafts gently in a circular motion. Then rinse with a plastic cup or low pressure shower stream. Once all the crusting is gone, you no longer need to follow the			polysporin to the donor area after shampooing. Day 3 - 7 Recipient Area Roll a thin layer of coconut oil on the recipient area with a Q-tip. Don't reapply	polysporin ointment to the donor incision daily after shampooing. Continue to apply for 2 days after sutures or staples are removed. Sutures or staples should be removed around 10-14 days after surgery as directed by Dr.
4	Tylenol/Ibuprofen: Take as directed on					
5	an as needed basis Antibiotic: Take as					
6	directed Oxycodone: Take as directed if provided				if you still have ointment left after washing your hair. Only apply once daily. This is to help	
7			head every few minutes with a low pressure shower stream or by pouring warm water over your head from a		with dryness.	
8						
9						
10			plastic cup. Keep your scalp wet for 20-30 minutes. Then proceed			
11		soaking instructions - simply wash daily.	with day 7 instructions for shampooing. Stop			Only apply once daily. This is to help
12			soaking when all crusting is gone.			with dryness.
13						
14		Return to normal hair washing routine.				