

# Forehead Flap: Instructions After Surgery

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## What should I buy before the procedure?

- Vaseline®
- Non-adherent gauze pad
- Paper tape
- Q-tips®
- Hydrogen Peroxide 3%
- Ice Packs
  - You may make some at home, please see the handout “How do I make an Ice Pack?” or visit <http://careguides.med.umich.edu> and search “How do I Make an Ice Pack?”
  - If you purchase them, buy the gel variety, and make sure they are lightweight)

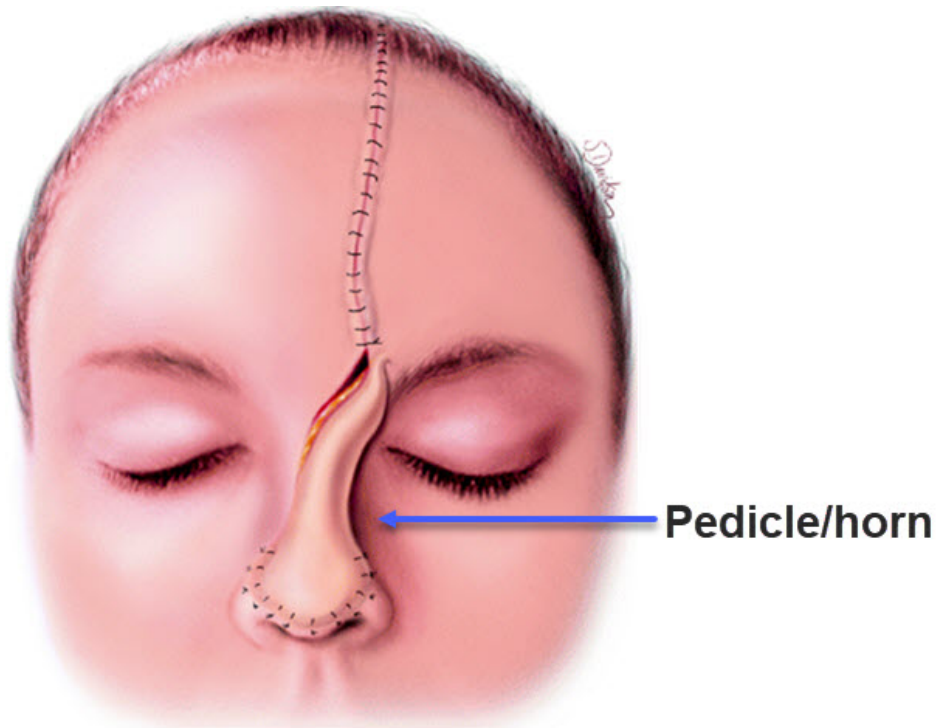
## How should I prepare for surgery?

- Stop smoking cigarettes 6 weeks before surgery.
- Stop chewing tobacco 4 weeks before surgery.
- No alcohol 24 hours before surgery.

## What should I expect during the procedure?

A **forehead flap** is a surgical technique used to reconstruct the nose to fix different kinds of nose defects. Skin, veins, and arteries are taken from the forehead to replace lost skin on the nose. This involves at least two initial surgeries, although in certain situations it may require three surgeries. The surgeries are spaced 3-4 weeks apart (see page 8 for a detailed timeline). This time frame is required for the body to establish a blood supply to the portion of the flap this is left attached to your nose after the second surgery.

Depending on how your healing goes after the initial surgeries other minor procedures may be recommended. These would happen several months later and can often be done in the clinic.



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### **What is a pedicle/horn?**

The pedicle is the forehead skin that is cut and brought down to cover the defect of the nose. The pedicle also holds a major artery which help the skin to be able to survive on its own. It may look pronounced and ridge-like.

### **What does the pedicle/horn look like?**

The Pedicle/horn may look like one of the following:

- **Raw side:** You may have a raw side which is left open to the air and covered with Vaseline or a yellow dressing wrapped around it. It is **normal** for the exposed, raw tissue of the flap to turn yellow. Often patients are concerned that there is an infection, but this is uncommon. As the air dries the exposed

tissue and the flap begins to shrink, you will not have to wash it as much. A true infection would result in a discharge of pus that may have an odor, along with a fever, excessive pain to the touch, or increased redness of the flap. Infection occurs in less than 3 out of 100 (3%) of patients having a forehead procedure.

- **Skin graft:** You may have a skin graft which would cover the raw edge. Cleanse the stitches area with ½ peroxide and ½ water and then apply Vaseline. In addition, you will have another surgical site, (donor site) that is typically on your shoulder.

### **How do I take care of my donor site if I had a skin graft?**

Follow these care instructions for your **donor site**:

1. Remove dressing 24 hours after surgery.
2. Apply Detachol® (adhesive remover) on the tape that is on the skin if it is present.
3. Let it soak for 1-2 minutes and then peel the tape off like a Band-aid®.
4. Typically, the area has been glued together. Do not pick or remove the skin glue.
5. Clean with soap and water once a day. You may get the donor site wet when you shower.

With either of the procedures above you may have some cotton-like material along the pedicle. This material is called fibillar and helps the areas stop bleeding. Please do not try to remove this material. It is ok if it naturally falls off. You may also apply Vaseline on top of the material.

### **What else should I know about the pedicle/horn?**

Over the first 3 weeks, the horn will shrink, this is normal. If your horn is very tight, your doctors may instruct you to use the cotton head of a Q-tip and run

that under the horn and out the other side. This may create a very weird sensation.

You may need assistance at home since the portion of the flap between your nose and forehead will restrict your vision. The horn will make it difficult for you to wear your glasses. We have a device called a Duralax eyeglass holder (\$10.00) that you can purchase to assist you with wearing your glasses.

### **How do I take care of my incision on my nasal tip and forehead?**

#### **24 hours after surgery:**

- You may shower.
- Remove forehead dressing.
- Apply Detachol® (adhesive remover) on the tape that is on the skin if applicable but do not get this in your eyes.
  - Let it soak for 1-2 minutes and then peel the tape off like a Band-aid®.

#### **First 3 days after surgery:**

- The first 3 days after surgery, cleanse the incision site/suture line with half hydrogen peroxide and half water on Q-tips® in a rolling motion to remove any crusting. Repeat three times per day.
- During the first 48 hours after surgery please follow the ice pack instructions. Use ice packs on the eyes and forehead to reduce swelling and increase comfort. Apply these to either side of the nose; but do not place directly on the flap (the horn of tissue extending from the forehead to the nose).

#### **3-6 days after surgery:**

- After 3 days of cleaning with half hydrogen peroxide and half water, clean the area with mild soap (for example, Dove® soap or Cetaphil®). Repeat three times per day.

- After each cleansing, apply Vaseline®. You should do this 3 times per day for the first 6 days.

## **What are my post-operative instructions?**

### **Home assistance:**

- Have someone drive you home after surgery and help you at home for 1-2 days.
- Ask for assistance if you need it, since the portion of the flap between your nose and forehead may restrict your vision.

### **Rest:**

- Get plenty of rest, it is normal to be drowsy after surgery.
- Try to rest on your first day home.
  - You may resume light activities 24 hours after surgery.
- Keep your head elevated for the first 2 nights after surgery; sleep with your head on 2-3 pillows or in a recliner.

### **Diet:**

- Follow a balanced diet. Your appetite may be less than usual.
  - Try to eat light, soft meals that you enjoy until you get your normal appetite back.
- Decreased activity may cause constipation, so you may want to add additional raw fruit to your diet.
- Make sure you are drinking plenty of fluids. Take in enough liquids so that you are urinating at least a “normal amount” (every 6 - 8 hours).

### **Medication:**

- Take pain medication as prescribed.
- Do not drink alcohol when taking pain medications.

- Even when not taking pain medications, avoid alcohol for 3 weeks. Alcohol causes fluid buildup in the body.
- If you are taking vitamins with iron, resume these supplements as tolerated.
- Do not smoke. Smoking delays healing and increases the risk of complications.

### **What should I expect my incision to look like?**

- Swelling and bruising of the face is normal and will peak 48 – 72 hours after surgery, then gradually decrease over time.
- Drainage and light bleeding from the flap during the first several days after surgery is common.
  - If you have fresh, red blood that saturates a gauze dressing **more often than one pad every 10-20 minutes**, please contact the clinic.
- Tightness may lead to headaches after the surgery, especially on the forehead where the tissue has been taken to cover the nose. This usually improves 1-2 weeks following the procedure.
- Numbness, tingling, swelling, itching, discoloration, hardness in some areas and redness around the incisions are normal side effects and should go away with full healing.

### **Dos and Don'ts for your incision care:**

#### **Do:**

- Keep the wound and sutures dry for 24 hours, unless advised otherwise.
- Wait to shower until 24 hours after surgery.
- Keep incision open to air while you are home. If you leave the house, you may temporarily cover the area with a telfa non-adherent gauze pad and secure it with the bandage tape.
- Plan all hair color treatments at least 3 weeks after the 2nd procedure. Your last hair treatment should be at least 5 days before your surgical procedure(s).

- Please note that you may have scalp numbness after surgery. Use a hair dryer on a cooler setting and frequently move it around to avoid any burns to the scalp.
- Massage the incision and use scar cream after 2-3 weeks after detachment surgery as advised by your doctor.

**Don't:**

- Soak the procedure area in bathtub, pools, or hot tubs while sutures are in place.
- Use make-up, sunblock, or lotions until 3 weeks after detachment surgery (after second or third surgery).
- Apply any essential oils or creams on incision until approved by your doctor.
- Expose scars to the sun for at least 6-12 months. Always use a strong sunblock if sun exposure is unavoidable (SPF 50 or greater).

**Activities**

- You may resume light activities 24 hours after surgery.
- Start walking as soon as possible. This helps lower your chances of:
  - Swelling
  - Blood clots
  - Pneumonia
  - Constipation
- Do not drive until you are no longer taking any prescribed pain medications (narcotics) and your vision is not badly blocked.
- Avoid activities that raise your blood pressure such as bending at the waist, lifting over 10 pounds, and rigorous sports for 10 days.
- You can resume exercising in 10 days.
- You can resume swimming in 3 weeks.

- You can expect to return to work in 4-6 weeks, although your doctor may be open to clearing you for return sooner in certain circumstances. If your employer has specific forms they would like to have filled out, please bring them to the office as soon as possible.

### **Surgery timeline:**

1. You will have a follow-up appointment 5-10 days after surgery to remove sutures.
2. You will have a detachment surgery 3-4 weeks after your initial surgery.
3. You will then have a follow-up appointment 5-10 days after your detachment surgery to remove sutures.
4. There will be 2-3 additional appointments as needed. One will usually occur 2-3 months after your detachment surgery and the next will be at 4-6 months.

**Important:** You will need to permanently establish a relationship with a local Dermatologist for periodic examination of your skin.

### **When should I call my doctor?**

#### **Call you doctor if you notice any of the following:**

- Increased swelling or bruising.
- Swelling and redness that persists after a few days.
- Increasing redness along the incision.
- Severe or increased pain not relieved by medication.
- Side effects to medications including;
  - Rash
  - Nausea
  - Headache
  - Vomiting
  - Diarrhea



- Loose stool
- An oral temperature over 101 degrees.
- Yellowish or greenish liquid from the incisions
- Foul odor from the incisions
- Bleeding from the incisions that is difficult to control.
- Loss of feeling or motion.

**In the event of life-threatening bleeding, you should call 911 or go to the emergency department.**

### **What is the contact information?**

- For patients of Dr. Brenner, Dr. Moyer, Dr. Rudy and fellow:
  - Call: (734) 432-7634
- For patients of Dr. Stucken:
  - Call (734) 998-6082
- For patients of Dr. Joseph and Dr. Kim:
  - Call: (734) 615-8838
- Afterhours and on weekends:
  - Call Hospital Paging at (734) 936-6267 and ask for the ENT Doctor on call.

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