



Name: \_\_\_\_\_

DOB: \_\_\_\_\_

## **POSTOPERATIVE INSTRUCTIONS – FACIAL IMPLANT**

**Please refer to “GENERAL POSTOPERATIVE INSTRUCTIONS” for additional instructions.**

### **Activity**

- Avoid hitting or rubbing over your implant.
- If you have worsening pain, redness, or murky drainage over your implant or incision, please call us immediately.

If you have any concerns or any signs of bleeding, infection, or wound problems, please call our office at 617-340-2822.

\_\_\_\_\_  
Patient Signature

\_\_\_\_\_  
Date