SINGLE Voice Feminization Surgery Post-Op Instructions:

PLEASE READ THROUGH EVERYTHING CAREFULLY AND KEEP FOR REFERENCE

OFFICE (585) 442-1110
AFTERHOURS (888) 549-2261
EMAIL: www.professionalvoice.org/feminization.aspx

Days 1-7:

Use extra-strength Tylenol (or generic) AND ibuprofen <u>AT THE SAME TIME</u> for post-operative discomfort. Follow the instructions on the bottles for the dose and frequency.

Every patient goes home on steroids. The steroids are MANDATORY and could be <u>life-threatening</u> if not taken. If you are spending the night in the hospital, the steroids are given IV during your stay, and you will begin the oral steroids the evening of the day <u>AFTER</u> your surgery. If you go home the same day you will begin the steroids the evening <u>OF</u> your surgery day. In either case, take the <u>entire day's</u> steroids <u>all at once every day</u>. That will be six tiny pills on the first dose. Call the office immediately for any breathing difficulty.

If you are discharged on the day of surgery, you will be given a single anti-nausea dissolvable wafer to be used that night if you are having nausea. If not, you do not need to take it. In any case, the nausea goes away within 24-36 hours after general anesthesia.

Your first meal or two after surgery should be small, soft and bland (yogurt, soup, rice) to keep you from vomiting. If and when your nausea is under control, you may resume a normal healthy diet that avoids alcohol, carbonated or sugary drinks and junk food.

Gentle throat clearing is OK, severe coughing is not. Warm tea with lemon and honey cuts down on the mucus and the throat clearing. Plain Mucinex may be tried but is usually not all that useful or necessary. You will go home with a codeine-based cough suppressant to use as necessary.

Work and activity: people respond to anesthesia differently. Some only feel 'groggy' for the day of surgery while others are 'out-of-it' for 4-5 days. Your body and common sense will dictate when you can resume **voiceless** work and light physical activity.

Days 1-30:

<u>There are 30 days of strict, absolute voice rest after the surgery</u>. This also means no whispering, mouthing words, moaning, groaning, sighing, grunting, panting (think aerobic exercise), humming or vocalized straining. Early or excessive voice use is associated with premature breakage of the stitches and surgical failure. Do not worry about things that you have no control over, such as talking in your sleep, sneezing, minor slip ups, etcetera. Concentrate instead on what you DO have control over.

You may contact me by email while on voice rest for NON-urgent questions: www.professionalvoice.org/feminization.aspx

Every patient will be taking stomach acid suppression medication for 1-3 months to limit silent reflux which could cause the stitches to dissolve early. Begin taking the morning after you are discharged from the hospital. After the surgery you are required to abstain from alcohol/ soda/ junk foods that could cause reflux for as long as you are on reflux medicine. A healthy diet = better healing. There are no other dietary restrictions. Sometimes taste will be altered post operatively for up to a month or

so. This is due to the pressure of the scope on the tongue causing a "Charlie-hoarse" on the taste nerve. This is annoying, however is expected to fully resolve in time. Please be patient.

Days 31-90:

Once you begin to gently use the voice on Day 31 expect a severe "surgical laryngitis" (hoarseness) for the first 4-8 weeks. In the beginning the voice will sound much, MUCH worse before it gets better. BE PATIENT! The final results could take 3-6 months until all of the swelling from the surgery resolves*.

It is rare for the vocal cord stitches to break if all post operative instructions are followed. The ONLY way to know is to come in for a scope. All clients who may be concerned are encouraged to do so, but it is certainly NOT required.

NO ELECTIVE surgery under general anesthesia should occur for a minimum of 6 months unless you are seen in our clinic and personally cleared beforehand. ALWAYS disclose this surgery to your surgeon and anesthesiologist so that they may contact me for special precautions.

Beyond 3 months:

IF you are doing or resuming speech therapy, do not start or resume until you are at least 3 months out from surgery. Speech therapy prior to 3 months could actually harm the final results.

*Some clients develop a small ball of scar tissue over the vocal cord stitches called a "reparative granuloma." These can only be diagnosed with a scope. >90% will go away on their own but may take up to 12 months to do so. When they do go away the quality of the voice and pitch will further improve. This is why the final result may take 6-12 months to achieve.