CHRYSALIS COSMETICS

Patient Instructions for Fat Transfer to Buttocks

1. No bending, lifting, or straining for the first 2 weeks. Rest in your bed or a chair with your back and knees supported by pillows.
2. Exercise your calf muscles and flex ankles every hour while awake for at least 10 minutes to help with circulation. Slow walking is recommended.
3. Take your prescribed medications as directed to remain comfortable.
4. Do not take Aspirin, Ibuprofen, Aleve, Fish oils, Vitamin E, Herbal supplements, etc. as these are blood thinning and may increase bruising for a minimum of 2 weeks after procedure.
5. Drink plenty of fluid. Avoid alcohol and caffeine.
6. You may shower on day 2. The clear dressings with gauze may come off, and that's okay, you can cover the small incision areas with a band-aid(s).
7. Standing or lying flat on tummy is required. Specialized pillows for sitting can be purchased prior to your procedure. This pillow is something you'll use for 2-3 weeks after your procedure to assist with sitting. This will put the pressure on your thighs instead of the buttock area.
8. Garment and/or binder should be worn at all times for the first week. After that, during the day for the following 4 weeks, wear for 12 hours a day during waking hours. Adjust garments or abdominal binders as needed for comfort and to eliminate any creases or indentations.
9. To maximize results, do not wear anything that puts pressure or compression on the buttock/hip area for 3 weeks after, this can compromise the fat supply and cause fat cells not to take.
10. Driving or operating machinery is not recommended for the first week, and while taking any narcotic pain medication.
11. Do not submerge yourself in water, such as a bathtub, pool, hot tub, etc. until clearance from Dr. Perry.
12. If you have any concerns during business hours and/or after hours at (916) 273-7435.

***If you have a life threatening emergency, call 911.**

Patient Name (Print):_____

Patient Signature: _____ Date: _____

Witness Name (Print):_____

Witness Signature: _____ Date: _____

785 University Avenue, Sacramento, CA 95825



P: 916.273.7435