Health Facts for You



Facial Gender Confirmation Surgery

Facial gender confirmation surgery, also known as facial feminization surgery (FFS) and facial masculinization surgery (FMS) are procedures tailored for individual transgender patients to feminize or masculinize facial features in the treatment of gender dysphoria.

Surgery may include reduction of the brow bone, setback/reduction of the forehead, eyebrow lift, lowering of the hairline, cheek augmentation, nose surgery/rhinoplasty, upper lip lift, jaw reduction, chin shaping, and reduction of the Adam's Apple (thyroid cartilage, also known as a tracheal shave).

Your Consult Visit

We have several surgeons at UW Health that perform facial gender surgery. At your visit, the surgeon asks about your goals, previous facial procedures, medicines, and overall health. You and your surgeon will discuss procedures to treat your gender dysphoria. Pictures may be taken during the visit. X-rays or a CT scan may be ordered to plan your surgery.

A letter of readiness for surgery is not required by international guidelines or for your consult visit but may be required by your insurance. It tells your insurance company that surgery is medically necessary. More information on Letters of Readiness can be found at: https://www.uwhealth.org/gender-services/patient-resources/52950

Insurance Coverage

We will ask your insurance company for prior approval for the procedures needed to treat your gender dysphoria. Surgery cannot be scheduled until we get approval. This process can take several months.

Some procedures are not covered by insurance such as fillers and certain surgeries. For these, you will be given information on costs and scheduling.

If coverage is denied, we can appeal the decision. At times insurance will send a partial denial. This means only some procedures will be covered. You will have to decide whether to pay for procedures not covered by insurance.

Once you are ready to schedule surgery, your surgeon decides how many procedures can be done safely. You may need a second surgery for more procedures.

Before Surgery

You must be free from all sources of nicotine (cigarettes, gum, patches, vape pens) for 8 weeks before and after surgery.

You will have a history and physical exam. This can be with your primary care doctor or our office. This is scheduled in the month before surgery. If you schedule this visit at our office, we will review surgery instructions and give you prescriptions for medicines to take after surgery.

For many facial surgeries, your surgeon may request you stop estrogen for one week before surgery to decrease the risk of blood clots.

The surgery center will call you the day before surgery. They will tell you when to arrive and where to check in. They will tell you when to stop eating and drinking. You should arrange for someone to drive you home after surgery and you may want an overnight hotel if you are driving a distance.

Day of Surgery

Your surgeon will meet with you and answer any questions. An IV will be placed in your arm or hand. We will confirm your legal name. Otherwise, we will always use your preferred name and pronouns.

Surgery is done under general anesthesia. This means you will be fully asleep. You will go home the same day.

After Surgery

You will receive instructions and medicines before you go home. Most people take 2 weeks off of work. Talk to your surgeon if your job requires a lot of physical activity. Discuss when it will be safe for you to go back to work.

Pain

Discomfort after facial surgery is different from person to person. Most patients say that the pain they have after neck surgery is mild. Patients report moderate pain after nasal and forehead surgery. Pain normally lasts 5 to 7 days. You will get a prescription for opioid pain medicine to use as needed at home. If you use opioid pain medicine, take a stool softener to prevent constipation.

You may be told to use acetaminophen (Tylenol®). Your surgeon will tell you if you can take anti-inflammatory pain medicine after surgery. (Examples include ibuprofen, Advil®, Aleve®, Motrin® or Naproxen®.) Unless you have been told not to stop your aspirin, do not take aspirin for 1 week before or 1 week after surgery, as it can cause bleeding.

Cold packs can be used to reduce swelling and ease pain. Cold packs work best if used during the first 48 hours. It is okay to use the cold pack for the rest of the week if it helps. Apply ice packs for 20 minutes at a time 6-8 times daily. Frozen peas or corn in a Ziploc bag wrapped in a towel works well.

General Guidelines After Surgery

- No strenuous activity for 2 weeks (such as aerobic exercise or jogging). Walk as much as you like after the first 48 hours.
- Do not lift more than 15 pounds for 4 weeks.
- You may drive 48 hours after surgery. If you are taking opioid pain medicine, you may drive 24 hours after your last dose.
- Keep your head elevated about 30° above your heart for the first week. Sleep on 2 to 3 pillows or in a recliner.
- Ask your surgeon when it is safe to shower after surgery. Do not soak your incisions.
- No tub baths, swimming or whirlpools for 2 weeks.
- Avoid sun exposure to the face for 3 months. Sun exposure can darken the incisions, cause swelling and slow the healing process. Wear a sunscreen with at least SPF 30 and a brimmed hat.
- Do not use tobacco and nicotine replacement for at least 2 weeks before and 8 weeks after surgery.
- If antibiotic solution or pills have been prescribed, take them as directed. These should also start the day after surgery.

Neck Surgery

Swelling and bruising of the neck is common. This will increase in the first 48 hours and then very slowly decrease in weeks to months.

Your surgeon will tell you when to remove the dressing on your neck. After the dressing is removed, wash your incisions gently with warm soapy water twice a day. Gently pat dry. Do not soak or scrub the incisions.

You may be given a Velcro removable dressing to wear after surgery. Wear this day and night for 1 week. After 1 week, it can be worn if comfortable but is not required.

There are no restrictions to using your voice after reduction of the Adam's apple (thyroid cartilage).

Frontal Cranioplasty, Hairline Lowering, and Brow Lift

Your scalp will feel numb after surgery. This will get better over the next few months. If you use a hair dryer, use the cool setting until numbness improves. You may lose hair along the incision.

Swelling and bruising of the face is common. This increases over the first two days and then very slowly decreases over the weeks to months.

Your forehead will be wrapped in gauze to prevent bleeding. Your doctor will tell you when this should be removed. The wrap may need to be removed in clinic 2 to 3 days after surgery. If your wrap is removed in clinic, you may wish to bring a scarf to cover your hair.

Once the wrap is removed you may shower and shampoo your hair with a mild shampoo. There may be blood in your hair. This should come out with the first shampoo, but it could take more washes. The entire head can be washed but be very gentle in the area of the stitches and staples. It is best to face away from the showerhead.

Do not apply any makeup or lotions to your face during the first week

Nose Surgery

Your nose will be stuffy. This is caused by swelling that will decrease over the next few weeks to months. You will mostly breathe through your mouth after surgery. This may cause your mouth and throat to feel dry and sore. Stay well hydrated. You may use a humidifier, vaporizer, and lip balm to provide comfort.

You may have swelling and mild tenderness around your nose, upper lip and cheeks. This should improve in the first few weeks. Some patients will have mild tenderness for 2-3 months. It is normal to have numbness and stiffness over the tip of your nose for up to 1 year.

Bleeding is common from the nose. Change the dressing under your nose when it gets soiled. You may need to change this every 15-60 minutes after surgery. Stop using the gauze when the drainage stops. Nasal drainage will slowly change to a pinkyellow color over the next few days.

You will have crusting in your nose for up to 6 weeks while the incisions inside your nose heal. Use a nasal saline spray to help loosen any crusting in your nose. Your surgeon will tell you when to start this after surgery. If you need to buy a bottle, saline sprays can be bought over the counter at any pharmacy.

A splint or nasal packing may be used inside the nose after surgery. You may also have a molded plastic splint/cast glued to the outside of your nose. This splint/cast is used to support and protect your nose as it heals. This will be removed at your first clinic visit.

After surgery, you may wear your lightest weight glasses lightly resting on your nasal cast or taped to your forehead. After your nasal splint/cast is removed, you should limit the time that glasses are worn.

Who to Call

Monday-Friday from 8:00 am – 5:00 pm: If you were treated at: ENT Clinic at UW Hospital, call (608) 263-6190 or (800) 323-8942

Transformations Clinic, call (608) 836- 9990 or (866) 477-9990

Plastic Surgery Clinic at UW Hospital, call (608) 263-7502

University Station Eye Clinic, call: (608) 263-7171

After 5:00 pm or weekends, the clinic numbers are answered by the paging operator. Ask for the doctor on-call. Leave your name, area code and phone number. The doctor will call you back.

Your health care team may have given you this information as part of your care. If so, please use it and call if you have any questions. If this information was not given to you as part of your care, please check with your doctor. This is not medical advice. This is not to be used for diagnosis or treatment of any medical condition. Because each person's health needs are different, you should talk with your doctor or others on your health care team when using this information. If you have an emergency, please call 911. Copyright © 10/2020 University of Wisconsin Hospitals and Clinics Authority. All rights reserved. Produced by the Department of Nursing. HF#8151.