SOUTHWEST BREAST & AESTHETICS

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POST-OP MEDICATION LIST - PRESCRIPTION & OVER THE COUNTER RECORD FORM											
Medication	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday				
***Record time of last dose	Date	Date	Date	Date	Date	Date	Date				
ibuprofen*** (Advil, Motrin)											
If prescription: 800mg oral tablet Take 1 tablet (800mg) every 8 hours for 5 days OR If over the counter. 200mg oral tablet Take 4, 200mg tablets (4 tablets = 800mg) every 8 hours for 5 days											
acetaminophen*** (Tylenol Extra Strength)											
500mg oral tablet											
Take 2 tablets by mouth (500mg x 2 tablets = 1000mg = 1 gram) every 8 hours for 3 days											
gabapentin (Neurontin)											
100mg oral capsule Take 2 capsules by mouth every 8 hours for 3 days											

POST-OP MEDICATION LIST - PRESCRIPTION & OVER THE COUNTER RECORD FORM										
Medication	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday			
***Record time of last dose	Date	Date	Date	Date	Date	Date	Date			
cyclobenzaprine (Flexeril)										
5mg oral tablet										
Take 1 tablet by mouth every 8 hours as needed for 3 days										
oxycodone										
5mg oral tablet										
Take 1 tablet by mouth every 4-6 hours										
enoxaparin (Lovenox)										
40mg/0.4mL injectable solution per syringe Inject 1 syringe into thigh one time daily for 6 days										
docusate sodium*** (Colace)										
100mg oral capsule										
Take 1 capsule by mouth every 12 hours until regular bowel movements										

^{***}These are over the counter medications