Post-surgery Instructions for:

Mastectomy

Orlando Health Surgical Group
14 West Gore Street
Orlando, FL 32806
321-843-5001

BEFORE YOUR SURGERY

- Do not take Aspirin or Aspirin products (i.e: Aleve, Advil, Ibuprofen, Motrin, Naprosen, etc) seven days prior to your surgery. Take Tylenol only.
- Do not take Coumadin 7 days prior to your surgery.
- Do not take Glucophage or Glucovance (Metformin) 2 days prior to surgery.
- Do not take herbal products or drinks 2 weeks prior to surgery (i.e: St. John’s wart, Gingko Biloba, etc)
- Notify your doctor if you develop any signs of illness, such as colds, sore throats, or infections before your procedure.
- Your physician may require specific pre-admission tests to be performed. These tests will be completed at least 2 days but not more than 5 days prior to surgery. You will be contacted by Pre-Admission Testing (PAT) to schedule a phone interview or be given an appointment depending on the location for your surgery.

Day of Surgery:

It is very important that you arrive promptly at the facility at the time stated.
A responsible adult, licensed to operate a motor vehicle MUST accompany all surgical patients to the facility and be present when the surgical patient is ready to be discharged. Generally, you should be ready to leave within approximately 4 hours after surgery.
Casual, comfortable clothing should be worn. Appropriate gowns will be provided by the facility. Valuables, jewelry and hairpieces should be left alone. If contacts or false teeth are worn, bring cases(s) for safekeeping.
We encourage you to ask questions and let the staff know of your special needs.

During your Surgery: The surgery takes 45 - 60 minutes. You will have a heart monitor, blood pressure cuff applied, and a pulse oximeter (measures the oxygen in your blood) placed on your finger. When your doctor is ready, the anesthetist will give you medication through your IV which makes you sleep through the surgery. After receiving the anesthesia, your doctor will make an incision on your breast and remove the breast tissue. The lymph nodes on the outer edges of the breast and under the armpit may also be removed. Laboratory tests will be done on the breast tissue and lymph nodes which are removed. A drain may be placed into the surgical area to allow drainage of excess fluids. Your doctor will use stitches or staples to close the incision. A dressing will be placed over the incision site.
You will go to the recovery room to awaken from the anesthesia. You will be monitored in the recovery room for approximately 1 hour.

**AFTER YOUR SURGERY**

**Incisions:** If you had a lumpectomy and axillary lymph node dissection, you will have one incision on the breast and one under the armpit. If you had a mastectomy, you will have one incision that goes from your breast bone in the center of your chest to your underarm. All incisions are closed with stitches under the skin. These stitches dissolve on their own and do not need to be removed. The skin is usually closed with small pieces of surgical tape called Steri-Strips. These will come off on their own as your skin heals. You should wear a bra for comfort and support while you are awake. You should wear a bra 24 hours a day. A surgical bra is preferable. If you use your own, an older, more stretched-out bra or a sports bra may feel better at first. Underwire bras are usually irritating and uncomfortable around the surgical area.

**Diet:** Begin with clear liquids and toast or crackers. If you can tolerate them well, progress to a regular diet. During this post-operative time it is important to remain hydrated, drink plenty of fluids. If you experience difficulties staying hydrated contact our office 321-843-5001.

**Driving:** Do not drive for at least 24 hours after surgery or as long as you are taking narcotic pain medications.

**Medication:** re-start all your pre-operative prescriptions and medications the day of discharge from the hospital.

**Icepacks:** Use cold compress at your surgical site 5-10 minutes each up to 4 times a day to help with discomfort and swelling for the first 48 hours.

**Activity:** Resume normal activities as soon as possible, there is no need to stay in bed. Rest as needed, normal energy levels will return over time. Limit shoulder movement/lifting of the arm above 90 degrees until after the drains are removed; this will help decrease the risk of developing seroma. Avoid heavy lifting for the first 7-10 days; do not lift more than 10 lbs with the arm on the affected side until your incision has healed completely. After 6 weeks you may resume more strenuous aerobic work and lifting activities as tolerated.

**Drains:** During your surgery, drainage tubes may have been placed in the surgical area near your incision. These tubes help drain fluid to reduce swelling and promote healing. The drainage tubes are stitched in place so they will not fall out. They are connected to a container which collects the drainage. Empty the drain, as you were instructed, at least once daily or more often as needed. “Milk” the tubing 4 times a day or more often if it becomes clogged. You will know the tube is clogged if there is no fluid collection in the bulb and/or leaking around the drain site where it enters the skin.