

OVERLAKE CANCER CENTER INSTRUCTIONS FOLLOWING MASTECTOMY SURGERY

Incision and Dressing Care

- Your incision will have both internal sutures and steri-strips (small white strips of tape covering the incision). We will remove the steri-strip(s) in seven to 10 days. The sutures are dissolvable.
- You will have 1-2 Jackson-Pratt (JP) drains placed at the time of surgery. The drain is positioned under the skin and exits your body below your incision. This will be covered with a transparent dressing. There is a bulb attached to the tubing, which should remain compressed. This provides suction under the skin, helping to drain the fluid normally produced as part of the healing process.
- Prior to leaving the hospital, you will be shown how to care for the drain and empty the fluid from the bulb. We ask that you empty the fluid 3 times daily and record the amount each time on a sheet of paper. When the amount of fluid from the drain is 30 cc or less in 24 hours, the drain can be removed. This is a simple procedure performed in our office.
- Occasionally, a small filter in the tubing becomes dislodged and can be seen in the collection bulb. As long as the bulb is able to be compressed to suction, there is no need to be concerned.
- You may shower 1-2 days after you are discharged from the hospital. It is fine to get the steri-strips and transparent drain dressing wet. Simply pat these areas dry after your shower. If you notice moisture under the transparent plastic dressing, it is best to contact us during office hours so that we can help you manage this. If this happens during the night, cover the area with an absorbent pad or bandage and we will change the dressing when you are seen in our office.
- Bruising and some swelling are common after surgery. Do not use ice packs over your surgical area. This reduces blood flow to the area and slows healing.

Diet

• You may resume your regular diet as soon as you can take fluids after recovering from anesthesia.

Pain Management

- Healing and recovery improve with good pain control.
- People experience different types and amount of pain or discomfort after surgery. The goal of pain management is to assess your own level of discomfort and to take medication as needed. You will have better results controlling your pain if you take pain medication before your pain is severe.
- You will be given a prescription for oxycodone or Norco for the management of moderate pain. Ibuprofen

(Advil or Motrin) or plain Tylenol can be added to these medications and/or may be used alone to manage pain. Please notify us of any drug allergies, reactions or medical problems that would prevent you from taking these drugs. Narcotics should not be taken with alcoholic drinks. We advise you not to drive while taking narcotics.

- Narcotics can cause or worsen constipation, so increase your fluid intake, eat high fiber foods-such as fruit and bran-and make sure that you are up and about each day. Prolonged time in bed is not advised.
- A mild sore throat for a day or 2 after surgery is not uncommon. This is due to the placement of tube in the upper portion of your throat during the surgery to protect your airway. The tube is placed by the anesthesiologist after you are asleep and removed before you are fully awake.

Activity

- Avoid strenuous activity, heavy lifting and vigorous exercise until you see us for you for your first post op visit. We can advise you at that time as to the level of activity that is appropriate for you. Walking is a normal activity that can be restarted right away.
- You may resume driving when you are no longer taking narcotics and you feel safe turning the wheel and stopping quickly. We advise taking someone with you the first time you drive following your surgery, to be sure you feel you can perform these maneuvers without difficulty.
- You will be given a list of exercises to regain movement and flexibility. You may be referred to physical therapy for additional rehabilitation if it is needed.
- If your surgery involves a lymph node dissection, don't avoid using your arm. Performing the shoulder range of motion exercises 2-3 times daily is important in your recovery. We encourage you to take medication for pain if pain is limiting your ability to perform these exercises.

Return to Work

• Most people return to work within three to six weeks. Return to work varies with your type of work, your overall health and personal preferences. Discuss returning to work with us.

Follow-Up Care

- The pathology results from your surgery should be available within 2-3 days after your surgery. We will contact you by telephone with the results and will discuss them in more detail with you at your postoperative visit. Please let us know the telephone number where you may be reached with the results.
- We would like to see you in our office for your first post operative visit, 7-10 days after your surgery. Please call our office 425.688.0212 to schedule this appointment if you have not already made the appointment at the time of your pre-operative visit.
- If the amount of fluid from your drain is less than 30 cc in 24 hours, you can contact our office and we will make arrangements to see you for a short visit to remove the drain prior to your post operative appointment.

When to Contact Us

Contact us for the following problems by dialing our regular office number: 425.688.O212

- Pain that is not relieved by medication
- Excessive swelling
- Fever more than 100.5 degrees Fahrenheit or chills
- Intolerance of the pain medication