Pedicle TRAM Surgery: What to Expect

Before Your Surgery

- One week before your surgery, please stop taking the following medications:
  - NSAIDs such as Ibuprofen, Motrin, Aleve, Naproxen, etc. as these can increase your risk of bleeding during and after surgery
  - Aspirin and any Aspirin containing medications
  - Cold medications that contain Aspirin or NSAIDs
  - Multivitamins and any over the counter supplements
- Please notify your surgeon’s office if you currently take any blood thinning medications such as Warfarin, Plavix, Lovenox or Fragmin
- Please call your surgeon’s office if you have any questions regarding medications that you should/should not take before surgery
- Please do not eat or drink anything after midnight the night before your surgery. You may take any necessary medications the morning of surgery with a small sip of water.

Hospital Stay

- You will likely remain in the hospital for 2-3 nights following your surgery
- Before you are discharged from the hospital your pain will be adequately controlled with oral pain medication
- You will be discharged with drains in place. The nurses will teach you how to empty and record your drain output

Activity Following Surgery

- No heavy lifting (greater than 10 pounds) or sports for six weeks. These activities use and twist your abdominal muscles, which increases your risk of an abdominal hernia
- You may not drive for several weeks until you are comfortable wearing a seatbelt and have been cleared to do so by your surgeon
- Please avoid raising your elbows higher than your shoulders or reaching your arms above your head have been cleared to do so by your surgeon, usually 1-2 weeks following surgery
- If you received a breast care booklet, please do not begin exercises in the booklet until after your drains have been removed
- Rest and take naps as needed throughout the day. You may feel tired the first few weeks after surgery
- You may use additional pillows under your legs for support when lying down (you should remain in a beach chair position) to avoid tension on your incision
- You may need to ambulate with your body hunched over to avoid tension on your abdominal incision. This will improve in a few weeks
- In order to prevent blood clots, it is important to walk around as much as possible following this surgery. Please walk at least 10 minutes 4 times a day
Pain

- You were likely prescribed pain medications. Take them as needed for pain. As your pain decreases, you will be able to decrease the use of the narcotic pain medication and control pain with Tylenol only. Do not exceed 4 grams of Tylenol daily
- Please avoid taking NSAIDs such as Ibuprofen, Motrin, Aleve, etc. as these can increase your risk of bleeding after surgery
- If you were prescribed a narcotic pain medication, it can cause constipation. In order to avoid constipation, increase your fluid intake you may also need to take a stool softener such as Colace or any of the other over the counter stool softeners
- Do not drive or drink alcohol while taking pain medication as it can make you drowsy and impair your judgment

Diet/Appetite

- You may resume your pre-hospital diet
- Drink plenty of fluids, at least eight glasses of eight ounces each day to help prevent constipation associated with pain medication

Caring for Your Wound

- It is normal to have some bruising and swelling for a few days after surgery
- You may shower, but do not soak or take a bath for two weeks after surgery, unless told otherwise by your surgeon
- Please attach the drains to a belt or necklace made from string, so that they do not pull on your skin while taking a shower. The nurse will review how to do this prior to discharge
- You may have steri-strips or Dermabond (skin glue) on your incision. These can get wet in the shower. They will start to dry and peel off on their own in the next 7-14 days
- If you have a clear plastic dressing (Tegaderm) over any of your incisions, this needs to stay on until your follow-up appointment with your plastic surgeon
- If your wound has oozing or drainage, you may cover it with a dry dressing. Please be sure to change the dressing at least every day
- If you were provided with an abdominal binder in the hospital, please continue to wear this at all times except while showering. You should continue wearing the binder for one month. Please ensure that the binder does not ride up and cause pressure over the area that carries the blood supply to your flap. You will be instructed on this prior to discharge from the hospital
- You will be discharged with drains and will be instructed on how to care for them. You can expect the drains to remain in place between 1-2 weeks
- **Do not** put any ointments or antibiotic creams on your incision. These will not make it heal faster

Medications

- Resume your pre-hospital medications. Follow-up with your primary care physician regarding new prescriptions or refills of your home medications
- **If you were given an antibiotic, continue to take it until all of your drains are removed. Do **not** stop taking the antibiotic just because you feel better
Follow-Up Appointment

- If you are not given a follow up appointment when you leave the hospital, call the surgeon’s office and make an appointment to be seen within one week after your surgery.
- At this appointment, we will check your incision and remove any drains and/or stitches. Your surgeon will also discuss the results of the surgery and your treatment plan.

When to Call Your Surgeon’s Office

- If you have a fever greater than 101°F, chills, nausea, vomiting, shortness of breath, leg pain, increased incisional pain not relieved with pain medication.
- If you notice signs of wound infection (redness/tenderness at or purulent discharge from your incision).
- If you have other concerns.
- Please call 911 or go to the closest Emergency Department for any life threatening emergencies.