

After Breast Surgery with Reconstruction



MASSACHUSETTS
GENERAL HOSPITAL

CANCER CENTER

WHEN TO CALL YOUR DOCTOR OR NURSE

Call your plastic surgeon, if you notice any of these symptoms:

- Red skin on your breast or around your incision
- Drainage from an incision
- Temperature above 101.5° F

Your surgeon is _____

This booklet tells you what to expect and how to care for yourself while recovering from breast surgery. You will learn how to manage any pain you may have and how to care for your incisions and drains. Be sure to follow any specific instructions your surgeon gives you.

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Tips to Keep You Comfortable After Surgery

How will I feel?

It is normal to feel tired for a few weeks after surgery. Your body will use a lot of its energy to heal from surgery. Make sure you get plenty of rest, eat well, and let others do things for you.

Most people feel upset after breast cancer surgery. Common feelings are worry, anger, and loss. Healing physically and emotionally takes time. Ask for support from others.

We are here to help you. Please call your plastic surgeon with any questions about your recovery.

Supporting your arm

Your arm can pull or put pressure on the area of your breast surgery. To support your arm in a comfortable position, put a pillow or folded towel under or behind your elbow when you are sitting or lying down. Sometimes a pillow on your lap or over your abdomen can help, too.

Riding in the car

Place a small pillow between the seat belt and your chest to lessen any rubbing or pressure on the surgical area.

Medications After Surgery

We will send your prescriptions electronically to your preferred pharmacy on file. You can pick them up before your surgery, at a time that is convenient for you.

Discharge instructions will be sent electronically through Patient Gateway. You may also receive a paper copy at the time of your discharge.

Pain

You will be given a prescription for pain medication to take for several days after surgery. **Take the pain medication as soon as you start to feel uncomfortable.** This will make it easier to control any pain you have.

While you are taking prescription pain medication:

- Do Not**
- Drive
 - Drink alcohol
 - Do activities that require concentration or coordination

Prescription:

Gabapentin (Neurontin): take 100mg every 12 hours for two weeks

Oxycodone: take 5mg every 4 hours as needed for severe pain if Tylenol does not help

- Wean off pain medication over the course of the next week.

Over-the-counter:

Acetaminophen (Tylenol): take 650mg every 6 hours as needed for mild to moderate pain

- You may take Tylenol for moderate pain instead of narcotic pain medication. Take as directed.

Do not take more than 3,000mg (or 3g) in a 24-hour period, as this can cause damage to your liver.

Do **not** take NSAIDs (Ibuprofen, Motrin, Advil, Aleve) for at least 2 weeks after your surgery. These medications can increase your chance of bleeding after surgery.

Infection prevention

If you were prescribed antibiotics, take them until your drains are removed. Call your plastic surgeon's office if your antibiotics run out before the drains have been removed.

Prescription:

Antibiotic

Duricef (Cefadroxil), Bactrim (Sulfamethoxazole/Trimethoprim) or Doxycycline (Doryx): antibiotic prescribed for you may vary based on any previous drug allergies.

Probiotic

(Lactobacillus): to help any stomach upset caused by your antibiotics. Take 1 capsule either 2 hours before or 2 hours after you take your antibiotic. Continue to take probiotic for one more week after you finish your antibiotic.

Muscle spasms

Prescription:

Lorazepam (Ativan): take 0.5mg every 6 hours as needed (if provided at discharge)

Constipation

Over-the-counter:

You may need to take a stool softener and/or laxative, such as **Colace**, if you are taking pain medication.

Caring For Your Surgical Site

- Leave your clear plastic dressing in place until your follow-up appointment.
- You may shower 48 hours after surgery unless your surgeon states otherwise. Do not allow direct water pressure to surgical sites.
- Do not soak in water or swim for 3 months.
- If you were given a bra in the hospital, continue to wear it until your follow-up appointment.

Activity

Do **not** do any of the following until your plastic surgeon clears you at your follow-up appointment:

Don't:

- Lift anything heavy (nothing that weighs more than a gallon of milk)
- Lift your arms above your head
- Use your arms to do any strenuous activity (activity that raises your heart rate or causes you to break a sweat)
- Exercise or do activities that raise your heart rate and blood pressure

When you get home, you should walk around the house several times a day.

You were probably given a booklet on stretching exercises. Please do not start these exercises until your surgeon tells you it is ok to do so.

How to Manage Your Surgical Drains

Drains are soft, plastic tubes placed in the area of your surgery to drain away fluid that collects under the skin as you heal. The drains are attached to suction bulbs where the fluid collects. The amount of fluid that collects each day will slowly decrease. The color of the drainage will change from red to reddish-yellow, then to a yellowish-white color.

Depending on the type of operation you had, one or more drains may have been put in by your surgeon. Please watch our video with instructions on how to empty your drain: massgeneral.org/breastcancer/treatmentmaterials



Managing your drains

There are five things you will need to do with each drain:

1. “Milk” the drain so that it does not clog
2. Empty the suction bulb and measure the amount of fluid in it
3. Keep a record of the amount of fluid that collects in each suction bulb
4. Follow your surgeon’s instructions for keeping the drain sites dry



“Milking” the drain tubing

It is common for clots to form in the tubing which will clog the drain. To keep the tube open, you need to “milk” it at least twice a day. “Milking” the drain means sliding your pinched fingers along the tubing to push any clots down into the suction bulb.

How to “milk” a drain:

1. With one hand, hold the drain tube in place close to the skin. Pinch it firmly so it doesn't move or pull your skin.
2. With the other hand, pinch your thumb and index finger around the tube. Slide your pinched fingers along the tubing, pulling downward to push the fluid toward the suction bulb.
3. Start at the top, close to the drain insertion site and go all the way down the tube.

Emptying the Drains

Empty each drain twice a day, or more if the suction bulb gets full. Record the amount of fluid in each drain separately. Use the drainage record at the end of this pamphlet.

How to empty the suction bulb



1. Open the plug at the top of the suction bulb.
2. Pour the fluid from the bulb into the measuring cup. Squeeze the bulb to empty it completely.
3. Measure the amount of fluid. Write down the amount of fluid from each drain separately.
4. Squeeze the air out of the bulb and close the plug. The sides of the bulb should be indented.
This is what creates the suction to draw out the fluid.
5. After measuring and recording the amount of fluid, you can flush the fluid down the toilet.

Phone Calls After Surgery

- A medical assistant or nurse will call you 1-2 days after your surgery to check on you and answer any questions you may have.
- Breast Oncology will call you to talk about the pathology about 7-10 business days after surgery or will discuss the results with you during your follow-up appointment if they are available.

If you experience any of these symptoms, call us:

- high fevers (101.5 or higher)
- chills
- nausea or vomiting
- shortness of breath
- leg pain
- severe pain not relieved by your medications

8am-5pm call the plastic surgery office

After hours call the main MGH number at 617-726-2000 and ask for the plastic surgery resident on-call.

Call 911 or go to the closest Emergency Room for any life-threatening concerns.

Removing the Drains

- Your surgeon will remove your drains at the first appointment after your surgery if the amount of fluid collected is 20-30 cc's daily over 48 hours. Drains will be removed over the first 1-3 weeks after surgery, depending on output.
- You will need to record the amount of fluid that collects on the Drain Record on the next page.
- A drain can remain an extra day or two, but it is important not to remove it too early.

After the drain or drains are removed:

Keep a piece of gauze over the drain site until there has been no spotting on the gauze for 24 hours. This is usually 2 to 3 days after the drain is removed.

Special Instructions

Post-Surgery Drainage Record

Bring your Drainage Record to your drain removal office visit.

DAY 1	DATE:	
	DRAIN 1	DRAIN 2
A.M.		
P.M.		
OTHER		
TOTAL		

DAY 7	DATE:	
	DRAIN 1	DRAIN 2
A.M.		
P.M.		
OTHER		
TOTAL		

DAY 13	DATE:	
	DRAIN 1	DRAIN 2
A.M.		
P.M.		
OTHER		
TOTAL		

DAY 2	DATE:	
	DRAIN 1	DRAIN 2
A.M.		
P.M.		
OTHER		
TOTAL		

DAY 8	DATE:	
	DRAIN 1	DRAIN 2
A.M.		
P.M.		
OTHER		
TOTAL		

DAY 14	DATE:	
	DRAIN 1	DRAIN 2
A.M.		
P.M.		
OTHER		
TOTAL		

DAY 3	DATE:	
	DRAIN 1	DRAIN 2
A.M.		
P.M.		
OTHER		
TOTAL		

DAY 9	DATE:	
	DRAIN 1	DRAIN 2
A.M.		
P.M.		
OTHER		
TOTAL		

DAY 15	DATE:	
	DRAIN 1	DRAIN 2
A.M.		
P.M.		
OTHER		
TOTAL		

DAY 4	DATE:	
	DRAIN 1	DRAIN 2
A.M.		
P.M.		
OTHER		
TOTAL		

DAY 10	DATE:	
	DRAIN 1	DRAIN 2
A.M.		
P.M.		
OTHER		
TOTAL		

DAY 16	DATE:	
	DRAIN 1	DRAIN 2
A.M.		
P.M.		
OTHER		
TOTAL		

DAY 5	DATE:	
	DRAIN 1	DRAIN 2
A.M.		
P.M.		
OTHER		
TOTAL		

DAY 11	DATE:	
	DRAIN 1	DRAIN 2
A.M.		
P.M.		
OTHER		
TOTAL		

DAY 17	DATE:	
	DRAIN 1	DRAIN 2
A.M.		
P.M.		
OTHER		
TOTAL		

DAY 6	DATE:	
	DRAIN 1	DRAIN 2
A.M.		
P.M.		
OTHER		
TOTAL		

DAY 12	DATE:	
	DRAIN 1	DRAIN 2
A.M.		
P.M.		
OTHER		
TOTAL		

DAY 18	DATE:	
	DRAIN 1	DRAIN 2
A.M.		
P.M.		
OTHER		
TOTAL		



Cancer Center Community Providers

Through our network of collaborations, patients have access to the latest cancer treatments and targeted therapies, early phase clinical trials, timely referrals for second opinions, and improved coordination of care.

Visit massgeneral.org/cancer/community or ask your care team for more information about what services are offered at each site.

Massachusetts General Hospital Cancer Center
55 Fruit Street, Boston, MA 02114 | 877-726-5130

Mass General Cancer Center at Emerson Hospital – Bethke
131 ORNAC, John Cuming Building, Suite 200
Concord, MA 01742 | 978-287-3436

Mass General/North Shore Cancer Center
102 Endicott Street,
Danvers, MA 01923 | 978-882-6060

Mass General Cancer Center at Newton-Wellesley Hospital
2014 Washington Street,
Newton, MA 02462 | 617-219-1200

Mass General Cancer Center at Cooley Dickinson Hospital
30 Locust Street, Northampton, MA 01061 | 413-582-2900

Mass General Hematology/Oncology Service at Martha’s Vineyard Hospital
1 Hospital Road, Oak Bluffs,
MA 02557 | 508-693-0410

Mass General Hematology/Oncology Service at Nantucket Cottage Hospital
57 Prospect Street, Nantucket,
MA 02554 | 508-825-8100

Mass General Radiation and Hematology/Oncology Services at Exeter Hospital
5 Alumni Drive, Exeter, NH 03833
603-580-7336

Mass General Hematology/Oncology Service at Southern New Hampshire Medical Center
8 Prospect Street, Nashua,
NH 03060 | 603-577-3089

Mass General Cancer Center at Mass General Waltham
52 Second Avenue, Suite 1110
Waltham, MA 02451 | 781-487-6100