

# **Breast Reconstruction**

## **Postoperative Instructions**

### **DIET**

You may eat a normal diet. However, start with clear liquids and bland foods such as toast or crackers and advance to more normal food as tolerated.

### **ACTIVITY**

Sleep on several pillows so you are propped up. Also pillows under your arms will help with the discomfort. You will find this helpful for a few days after surgery.

Do not sleep on your stomach for 4 weeks.

No heavy lifting (more than 10 pounds) for 4 weeks. No strenuous activity for 4 weeks. You may begin light exercise 2 weeks after surgery.

### **WOUND CARE**

Leave your dressing on. It will be removed at your first postoperative visit.

You may shower after the first postoperative visit. The incision can get wet; just towel pat the area dry.

### **NO HEATING PADS**

No underwire bras for at least 4 weeks, until cleared by your surgeon.

Your sutures dissolve. However, suture stands at the ends of the incisions may be present. These will be trimmed at your postoperative visit.

If you have surgical drains in place, keep them supported (safety pin to clothes or a belt when showering) to avoid pulling them out accidentally. Clean drain sites with soap and water daily and dress with antibiotic ointment and gauze.

Empty drains twice daily and record the drainage (each drain individually). Bring record of drainage with you to your office visits

### **MEDICATIONS**

**If your doctor prescribes medications then fill them prior to surgery. If no medications were prescribed they will be administered to you after surgery before you leave the hospital/surgery center.**

When you arrive to the surgical facility you will be given pain and other preoperative medications prior to surgery. Take the pain medicine as prescribed if you are in pain. For the first 24 to 48 hours you will be more comfortable if the medicine is taken on a regular schedule rather than waiting long periods between doses. Pain medications prescribed work differently to control your pain. They can be “stacked” taken at different times to control your pain better.

### **WHAT TO REPORT TO YOUR DOCTOR**

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| <ul style="list-style-type: none"><li>● Unusual or severe pain unrelieved by your medication.</li><li>● Excessive bleeding or continued bleeding not decreasing over time</li><li>● Excessive swelling and or redness of the surgery site</li></ul> | <ul style="list-style-type: none"><li>● Persistent vomiting</li><li>● Discomfort from a full bladder or have not urinated in 8 hours</li><li>● Temperature over 101° F</li></ul> |
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### **FOLLOW-UP APPOINTMENT**

Your follow-up appointment with Dr. Mark Leyngold is scheduled for\_\_\_\_\_.

For any problems, concerns or questions, please CALL THE OFFICE at (208)900-4673. Follow the instructions for the doctor on call. If you feel your symptoms are an emergency, go to the Emergency Room closest to you or call 911.

## A GUIDE TO YOUR PRESCRIPTION MEDICATIONS

### Prescription:

**CELEBREX** (Celecoxib) 200mg: One tab by mouth two times daily.

**NEURONTIN** (Gabapentin) 300mg: One tab by mouth three times daily.

**OXYCODONE** 5mg. Take 1tab by mouth every 8 hours as needed for pain

**TYLENOL** (Acetaminophen) 1000mg: 1000mg by mouth every six hours.

**ZOFRAN** 4 mg. Take 1tab by mouth every 8 hours as needed for pain

## INSTRUCTIONS FOR SURGICAL DRAINS

- This is a special drain that prevents body fluid from collecting near the site of your surgery by pulling fluid by suction to the bulb.
- Initially, the fluid may appear bloody. As you heal, the fluid will change to light pink, light yellow, or clear.
- The drain will stay in place until less than 20cc of fluid is collected over 24 hours, two days in a row. Depending on the amount of drainage, the bulb will need to be emptied every 8-12 hours, or when the bulb is half full.
- Drains should be supported at all times, including showering, You may support them with safety pins, ribbon, or attached to a belt.

### HOW TO EMPTY THE DRAIN:

- After washing your hands with soap and water, removed the plug from the bulb. The fluid should be measured using the marked levels on the bulb, the fluid should then be emptied.
- Clean the plug with alcohol, squeeze the bulb flat, and plug the bulb so a vacuum suction can be maintained.
- Record the output on your drain log.

### HOW TO CARE FOR THE SKIN AND DRAIN SITE

- After washing your hands with soap and water, remove the dressing from around the drain.
- Cleanse the area with soap and water with a Q-tip or gauze.
- Once dry, re dress the site with clean dry gauze and surgical tape.

### COMPLICATIONS AND SIGNS OF INFECTION TO REPORT:

- Should fluid leak from around the drain site, gently remove the gauze, cleanse the area, and re dress. Check that the drain is squeezed flat to create suction.
- If a clot appears within the drain, (it will appear as a dark string), the tubing should be stripped as instructed.
- Symptoms of possible infection include: increased redness, increased pain, increased swelling, foul smelling drainage, and temperature greater than 101°F.
- Symptoms of infection should be reported as soon as possible. Sudden filling of the drain with blood should also be reported.



Date: Time:				
Date: Time:				
Date: Time:				

**Medications after surgery: Take as directed:**

**Prescription:**

**CELEBREX** (Celecoxib) 200mg: One tab by mouth two times daily.

**NEURONTIN** (Gabapentin) 300mg: One tab by mouth three times daily.

**Over the Counter:**

**TYLENOL** (Acetaminophen) 1000mg: 1000mg by mouth every six hours.

**IF pain is uncontrolled with the above medication:**

**Prescription:**

**OXYCODONE:** 5mg: One tab by mouth every 6-8 hours as needed for breakthrough pain.