

# ***Alloplastic Breast Reconstruction Post-Op Instructions***

## **Overview:**

You have had an "alloplastic breast reconstruction", or a reconstruction of your breasts using breast implants or tissue expanders. This surgery may have happened at the same time as your mastectomy, or in a separate surgery afterward. Depending on your specific circumstances and surgical goals, you may have had permanent breast implants placed at the time of this operation or may have temporary tissue expanders in place that will stretch the breast skin and allow permanent implants to be placed at a later date.

If you are undergoing immediate reconstruction of your breasts, at the time of mastectomy, please ensure that you have spoken to your general surgeon and understand what surgery and other treatments you require for your breast cancer. If your reconstruction is delayed, please ensure that your plastic surgeon is aware of any ongoing or planned breast cancer treatments. Ensure that you speak to your surgeon about any medications you may be taking since some medications may need to be stopped to prevent blood clotting complications (e.g. Tamoxifen needs to be stopped 30 days before surgery), or alternately to prevent excessive bleeding (e.g. Aspirin, Coumadin, Plavix, Ginger or Gingko supplements should all be stopped at least 10 days prior to surgery, under the guidance of your physician).

Have nothing to eat or drink after midnight on the night before surgery. Plan to shower the night prior or morning of your surgery. You will likely be spending one night in hospital after your surgery, but if you have been cleared to go home on the same day please ensure that you have a responsible adult to take you home and stay with you that night. Please bring a light to medium support bra without underwire to wear home from the hospital. This can be a specially bought surgical bra or a sports bra with soft cups. Bras with front closure and a wide band will be most comfortable.

## **After Surgery:**

Some discomfort is normal after surgery. Other common concerns after surgery are nausea and fatigue. You will most likely have surgical drains in place after your operation. Your nurse will teach you how to care for and empty these drains. The length of time you will need your drains varies and can be anywhere from a couple of days to a couple of weeks. You will be on antibiotics while your drains are in place to prevent infection in your newly reconstructed breasts.

# ***Alloplastic Breast Reconstruction Post-Op Instructions***

Your first follow-up appointment is planned 1-2 weeks from surgery. You can expect to have your surgical sites checked and your drains removed at this scheduled appointment; please bring the log sheet of your drain outputs to this appointment. Please call the office for an earlier appointment if any unexpected problems or concerns arise.

## **Incision Care:**

You will be discharged from hospital with drains and surgical dressings in place. You may remove the covering dressings from your incisions and drains after 72 hours to shower; do not soak or swim for at least two weeks or 72 hours after your drains have been removed. After removing these covering dressings, you should see plastic (purple Prineo) or paper tapes (Steristrips) over your surgical incision and a suture holding your drain. Shower with these in place and pat them dry after your shower. After showering, you do not need to cover the tapes on your incision unless you wish. You should, however, always apply a clean bandage or gauze over your drain site.

## **Activity and Care at Home:**

You should wear your soft cup (no underwire) bra at all times for the first six weeks after surgery, including to sleep. The only exception to this would be if you have had a reconstruction with a tissue expander that has not been inflated and your chest is therefore flat.

If you need to purchase a soft cup bra, you can do so at One Bracing.

The surgery will be performed under general anaesthetic therefore must not operate motor vehicles, boats, power tools or machinery for the first 24 hours. You may drive after three days or when you are no longer taking narcotic pain medication.

Avoid heavy lifting and strenuous exercise for 4-6 weeks after your surgery. Light activities such as walking are encouraged. Many patients use the Canadian Cancer Society: Exercises After Breast Surgery brochure for activity guidance. Please be aware that the exercises in this brochure are intended for patients who have had breast surgery without reconstruction and may not be appropriate for you, especially if you have had implants or tissue expanders placed under your muscles. Please check with your reconstructive surgeon before starting any of these exercises.

# ***Alloplastic Breast Reconstruction Post-Op Instructions***

## **Pain Management:**

Some discomfort and pain following surgery is to be expected. Staying ahead of your pain for the first 48 hours helps. Non-opioid medications should be prioritized, and opioids only taken if extra pain control is required. Try to take as few opioids as possible (codeine, tramadol, dilaudid, morphine, oxycodone).

Try taking two extra strength acetaminophen/ Tylenol (500mg) every six hours or two regular strength acetaminophen/ Tylenol (325mg) every four hours. Be aware that some prescribed medications already have acetaminophen in them (usually 325mg), so substitute each one of regular strength acetaminophen tablets every 4 hours with a prescription medication if you need, so that you do not take more than 4000 mg of acetaminophen in 24 hours. Patients with liver disease should be careful with the acetaminophen dose.

## **IMPORTANT:**

The surgery will be performed under general anaesthetic therefore must not operate motor vehicles, boats, power tools or machinery for the first 24 hours. You may drive after three days or when you are no longer taking narcotic pain medication.

If you experience increasing rather than decreasing pain, bleeding not controlled with pressure, excessive swelling or bruising that occurs only on one side, increased swelling or redness around the wound, increased drainage from incisions or in your drains, foul odour, fever, chills, please call your surgeon's office. If you experience shortness of breath, or arm or leg pain, call 9-1-1 or visit your emergency department.