

Mastectomy with Sentinel Lymph Node Biopsy (with immediate reconstruction) Post-Surgery Guide

The following information is intended to guide you through your post-op recovery. Please note that your Plastic Surgeon will also have postoperative instructions for you as well.

Diet:

- For the first few days after surgery you should eat foods that you easily tolerate normally.

Medications/Pain Management:

- Follow the directions on any new prescriptions that your doctor has given you. You will be instructed prior to your discharge about what daily medications you will need to take when you return home.
- Pain management is an important part of your post-surgery care. You should expect some discomfort after your surgery. You may be sent home with a prescription for pain medication. It is important to take your pain medicine prior to your pain becoming intense in severity.
- PLEASE NOTE: Pain management and medication refill requests should be requested through your Plastic Surgeon's office.
- Side effects from the pain medications include nausea and constipation. If you experience nausea or vomiting related to your pain medications, you should stop the medication and take ibuprofen or acetaminophen for pain management.

Bowel Care:

- To prevent constipation you should drink plenty of fluids and take a stool softener such as docusate (Colace) daily. Walking is often helpful to stimulate bowel movements.
- If you have not had a bowel movement within 48 hours after your return home, you should increase your fluid intake. You may take **one** single dose of Milk of Magnesia, as long as you have no abdominal distention. Or you may start over-the-counter Miralax, once daily; you should stop this medication when you reestablish your normal bowel habit.

Incision Care / Drain Care:

- You will have several drains in place after your surgery. You will need to empty the bulb(s) at least twice a day and keep a record of the output for each drain per each day. The hospital staff will give you instructions on the care of the drains.

- Despite discharge instructions from the hospital you do NOT need to clean the drain bulb caps with alcohol. This is unnecessary and may make them too slippery to stay capped.
- Do NOT shower while the drain tubes are in place.
- Please leave your dressings in place until your first office visit. You may re-tape any part of the dressing that loosens and is about to fall off.
- Decisions regarding removal of the drain tubes are made by the Plastic Surgeon, who will see you first postoperatively. Please contact their office with questions regarding dressings or drain removal.
- Once the dressing is removed you must observe your incision daily for signs or symptoms of infection. These signs include: increased swelling, redness or wound drainage with odor. It is normal to have some swelling and bruising around your incision.
- When your outer dressing is removed you may see steri-strips (tape) across your incision. Those strips should remain in place.
- PLEASE NOTE: You should contact your Plastic Surgeon's office regarding any concerns with your incisions and/or drains.

Physical Activity:

- Your Plastic Surgeon should advise you regarding your activity level.

Bathing and Showering:

- Please check with your Plastic Surgeon regarding when you may shower. Typically you are NOT allowed to shower with the drains in place.

Driving:

- You may drive when you no longer are taking narcotic pain medications *and* you feel you can quickly respond to situations that will not place others in jeopardy.

Return to Work:

- Your Plastic Surgeon should inform you of when you might return to work.

Pathology Results:

- The pathology results will usually be available four to five "working" days after your surgery. You can call the office in the afternoon on your fifth post-op day if you have not heard from our office and would like to check for results. Please note your doctor may not be available to discuss your results with you directly when you call.
- If you choose not to call, your results will be covered in detail at your first postoperative appointment with your provider

Note:

- You should discuss increasing activity level and lymphedema prevention (if appropriate) after surgery with your doctor.
- If you had a sentinel lymph node biopsy your urine may turn blue for approximately 48 hours after your surgery. This is expected and considered normal.
- Do not allow any blood pressures or lab / IV punctures on the arm of the affected side (surgery side). Discuss the length of these restrictions with your surgeon at your postop appointment.

Follow-up Appointments:

- Your initial follow up appointments will be with your Plastic Surgeon. You will need a follow up appointment with your General Surgeon, usually after the drains have been removed by Plastic Surgeon's office (usually 2-3 weeks postop).
- You will be given instructions about your post-operative follow up the day of your surgery; please follow the instructions. If you have not already done so, please call the office after your surgery to schedule this appointment.

Problems to Observe For:

Call your Plastic Surgeon's office for the following:

1. Fever >101.0
2. Uncontrolled pain. That is on a scale of 1-10 (10 being the worst pain imaginable) your pain is a level 7 or above.
3. Nausea and / or vomiting that continue for 12-24 hours.
4. Diarrhea that continues for 12-24 hours.
5. Signs of a wound infection.
6. Chest pain or difficulty breathing
7. Your incision separates or opens up.
8. Significant drainage leaking around the drain.

Please call the office if you have further questions after reading this handout. The office is open from 9:00AM to 5:00PM Monday through Friday. For emergencies after office hours, the answering service will be available when you call the office number.

NWSS Phone: (541) 868-9303



INSTRUCTIONS FOR CARE OF JACKSON-PRATT RESERVOIR

1. Never allow the Jackson-Pratt (JP) reservoir to become more than half full.
2. Wash your hands before and after handling the drain reservoir, and wear gloves while emptying it.
3. To begin emptying the reservoir, remove the plug from the top of the reservoir.
4. Empty the reservoir by gently squeezing fluid into the measuring container.
5. To close reservoir, squeeze reservoir in the middle until you have removed as much air as possible. Replace the cap.
 - The reservoir is functioning properly when it is collapsed on itself when the cap is in place.
 - Please record date, time and amount of fluid emptied on the accompanying sheet.
 - Bring this sheet with you when you come to your office appointment.

DRAIN OUTPUT RECORD

Name: _____

1. Empty each drain atleast in the morning and evening.
2. Measure and record amt of fluid emptied from each drain reservoir separately.
3. Be sure to bring the drain output record the office for your appointment.

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