

BREAST RECONSTRUCTION

Pre-Operative and Post-Operative Patient Instructions

WATCH PRE AND POST OP RECOVERY VIDEOS



[Preop Instructions Video](#)



[Post-Op Instructions Video](#)

PRE-OPERATIVE INSTRUCTIONS FOR BREAST RECONSTRUCTION SURGERY

SHOPPING LIST



Prescriptions

Submitted to your pharmacy. Your pharmacy should contact you when ready to pick up.



Stool Softener (preferably MiraLAX)

Helps with constipation associated with narcotic pain relievers.



Tylenol (Acetaminophen)

Alternative to narcotic pain medication if pain is not severe. Do NOT take NSAIDS.

NIGHT BEFORE SURGERY

- **DO NOT EAT OR DRINK ANYTHING AFTER MIDNIGHT OR SURGERY WILL BE CANCELLED.** If prescribed, take medications with a small sip of water.
- **Set Up Home Recovery Area.** This may include pillows, blankets, books, television, and anything else to assist with a comfortable recovery.



THE NADERI CENTER
PLASTIC SURGERY & DERMATOLOGY

Pre and Post Breast Reconstruction Instructions

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DAY OF SURGERY

- **Dress Comfortably:** Dress in comfortable, clean, and loose-fitting clothes. Shirts that can be buttoned or zipped up are preferred.
- **DO NOT wear** any makeup, jewelry, cosmetic creams, hair products, deodorant, sunscreen, and remove all piercings.

POST-OPERATIVE INSTRUCTIONS FOR BREAST RECONSTRUCTION SURGERY

MEDICATIONS

- **Pain:** You will be prescribed a pain medication for post-operative pain control. If your discomfort after surgery is not strong you are welcomed to take Tylenol in place of the prescribed medication. Do not take Tylenol with the pain medication, often the medication you are prescribed will have Tylenol in it. **Do not exceed 4,000 mg of Tylenol in any 24-hour period.** Take medication with food to minimize risk of nausea.
- **Nausea:** If you are experiencing nausea, which is common after general anesthesia as well as a known side effect of some stronger pain medications, we advise that you take your nausea medication.
- **Constipation:** You will experience constipation if taking narcotic pain relievers. MiraLAX or other over the counter laxatives are recommended. Do not wait to take until you are constipated.
- **Medications to Avoid:** Take only those medications approved or prescribed by your surgeon.

NIGHT OF SURGERY

- **Movement is Important.** Make sure you are up and walking around immediately after surgery. When lying down in bed or on the couch, make sure you are moving your legs and ankles. Take deep breaths frequently to keep your lungs clear.
- **Sleep.** Sleep on your back with your head elevated about 30-40 degrees (2-3 pillows). Do not sleep on your side. Keeping your body more upright will minimize swelling. Continue this for at least two weeks.

NUTRITION

- **Diet:** A light low-fat diet is best after surgery. You may start a regular diet the day after surgery if you are not feeling nauseous or vomiting. Start with liquids for the first few hours after surgery and then slowly advance to more solid foods.



- **Hydration:** Stay hydrated by drinking 8 -10 glasses of water a day. Avoid alcohol for 48 hours while you are still taking pain medications.

ACTIVITY

- **Sleep:** Sleep on your back with your head elevated about 30-40 degrees (2-3 pillows). Do not sleep on your side. Keeping your body more upright will minimize swelling. Continue this for one week.
- **Exercise:** Normal daily activity may be resumed a few days after surgery. Exercise may be resumed 1-2 weeks after surgery. Remember to start easy and build back up to your previous exercise levels. Just know that swelling may transiently be worse with exercise.
- **Arm Movement:** Limit your arm use to daily activities such as brushing your teeth, eating, and combing /shampooing your hair. Avoid rigorous movement and do not lift more than 5 lbs. Let pain be your limiting factor. If it hurts, please do not do it.
- **Compression Bra:** Expect to wear a special bra for the entire first week after surgery and then as recommended by your surgeon. The bra should fit snug but not too tight. The surgical bra is to provide support while you heal from surgery.
- **Driving:** DO NOT operate a vehicle or make important decisions until you have been off pain medications for 24 hours. Use good judgment.
- **Return to work:** Most patients require approximately 5-7 days off work depending on their job responsibilities. Returning to work with a light schedule initially or even part-time can be beneficial as well.
- **Sexual Intercourse:** Sexual activity can be resumed when you feel ready with no restrictions. Incisions should be well healed. Patients typically feel ready after one month.
- **Showering:** You may shower with assistance the day following surgery. Remove your garment. Incisions are covered with a waterproof dressing and require no attention. Replace garment after your shower.

HOW TO TAKE CARE OF YOUR INCISIONS

- **Incisions:** Your incisions are covered with a waterproof dressing. No dressing changes or incision care is required. After your first postop visit, the dressing will be removed, and tape will be applied. This special brown tape helps with scar healing and improves the appearance. Continue to cover your incision sites with the brown tape for as long as your surgeon suggests.



- **Drains:** Empty the bulbs attached to the drain every 12 hours and measure the fluid output separately from each drain. Keep a record of the output and bring this record with you each time you come to the office for post-operative care. Watch our “Management of Drains” video at www.nadericenter.com.
<https://youtu.be/HvICYdnfyu4>
- **Stitches:** All stitches are dissolvable.
- **Scar ointment:** Scars are small and hidden in the breast crease. They may take up to a year to fully heal. After your incisions have completely healed and when your doctor has told you it is safe, you can begin to use a silicon-based ointment on your scars to improve healing.

WHAT TO EXPECT

- **Bruising:** You can expect to have bruising. Most bruises will heal after about 2-3 weeks. The bruise will go from a purplish color to a yellow/green shade as it starts to resolve.
- **Swelling:** Swelling is to be expected for weeks and sometimes months. The swelling can improve with intermittent rest and compression garments. Exercise and physical activity can transiently worsen swelling, but it is encouraged.
- **Itching:** Itching at the incision sites is normal for a few days. You may take Benadryl to help with this.
- **Discolored Urine:** If you had a sentinel lymph node biopsy with your mastectomy, your urine may have a greenish discoloration. This is normal and will resolve as the blue dye slowly leaves your body.
- **Pain:** It is normal to experience tightness, pressure, soreness, itchiness, and fatigue for several days to weeks following surgery as your skin and muscles heal. You may find that short naps will help with fatigue.
- **Implant Position:** If implants were used for your reconstruction, they may appear higher in position, firm, and uneven due to swelling during the healing process. After 3-6 months the implants should show a more final result with significantly reduced swelling.

DO NOT'S

- **DO NOT apply hydrogen peroxide to incision sites.** Keep postop dressings in place until follow-up.
- **DO NOT soak in baths, jacuzzies or hot tubs** until all incisions have fully healed.



- **DO NOT take Aspirin, Ibuprofen, Naproxen, or other blood thinners** until your surgeon advises you it is safe.
- **DO NOT apply heating pads or ice packs to the treated areas** unless otherwise instructed by your surgeon.

EMERGENCY SITUATIONS – WHEN TO CALL THE OFFICE (703-481-0002) OR GO TO THE HOSPITAL

- **Signs of Infection:** Spreading redness, worsening swelling, increased drainage or drainage of pus, worsening pain, warmth at incision site and temperature over 101°F.
- **Excessive Bleeding:** If the dressings are saturated with bright red blood and you are having to make very frequent dressing changes.
- **Clogged Drains:** If you notice significant leakage around the drains, this is not normal, and the drains may be clogged. Your drains will need to be checked.
- **Other Emergency Situations:** Shortness of breath or difficulty breathing, chest pain, lightheadedness that does not quickly resolve, severe vomiting, pain, or asymmetric swelling in your legs.