



## PRE- AND POST-OPERATIVE INSTRUCTIONS FOR MASTOPEXY

Once your surgery is completed, you must follow all the instructions given to you in order to heal properly and have a good outcome.

### Pre-Operative Guidelines:

1. Discontinue ASPIRIN or ASPIRIN-containing products, VITAMIN E and NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (such as MOTRIN or ADVIL) **2 WEEKS** prior to surgery. Aspirin and Vitamin E can increase bleeding. Avoid alcohol for 2 days before surgery and 7 to 10 days after surgery. You must stop smoking and/or using nicotine containing products **6 WEEKS** prior to surgery. Nicotine decrease oxygen to tissues and skin, thus delaying the healing process. You may be tested for nicotine peri-operatively.
2. You may receive prescriptions pre-operatively, please see the “medications” section for more information. Please fill these prescriptions and have them ready at home prior to your surgery.
3. Shower the night before or morning of surgery and do not apply any lotions or creams to the skin prior to surgery. We do ask that one week prior to surgery you shave or trim any hair near the surgical site (this includes the underarms). After you have shaved one week prior, do not shave again before your surgery. Do not wear any makeup, jewelry or contact lenses to the operating room. On the day of surgery plan to wear dark, comfortable clothing (gym attire is appropriate) and flat, comfortable shoes.
4. Do not eat or drink anything after midnight the night before your surgery. You may take morning medications with a sip of water.
5. Since you will not be allowed to drive after surgery, be sure to make arrangement for someone to pick you up from the hospital when you are discharged.
6. Notify the office immediately of any signs of fever, cold or infection during the week prior to surgery.
7. If you are at the age where you require yearly screening mammograms, you will need to have an updated mammogram prior to surgery.

### Medications:

1. **Narcotic pain medication (Tramadol or Oxycodone)** - You will be taking this medication as prescribed only **as needed** to help decrease pain postoperatively. Only take this medication if your pain is not relieved with the ibuprofen and Tylenol.
2. **Advil (Ibuprofen)** – You will be able to take 600-800mg every 8 hours in addition to narcotic pain medication, if not contraindicated (gastric ulcers, kidney failure, previous gastric bypass, etc.)  
\*Over the counter ibuprofen tablet is 200mg therefore 4 tablets=800mg. Do not exceed 2400 mg in 24 hours

3. **Tylenol (acetaminophen)** – You will be able to take 650mg every 6 hours in addition to ibuprofen and narcotic pain medication, if not contraindicated (liver disease, etc). Do not exceed 4000 mg in 24 hours
4. **Valium (Diazepam)** - This medication can be taken as prescribed on an **as needed basis** to help with anxiety and/or muscle spasms. **You may take 1 tablet the night before your scheduled surgery date.** \*If you do not receive this medication then please disregard.
5. **Keflex (Cephalexin) / Clindamycin (Cleocin)** – If given antibiotics, begin taking your antibiotics the first postoperative night you return home. Take these medications as directed. \*If you do not receive antibiotics please disregard.
6. **Phenergan (Promethazine) / Zofran (Ondansetron)** - Take this medication as prescribed on an as needed basis to help decrease signs and symptoms of nausea/vomiting. \*If you do not receive this prescription please disregard.
7. **Stool Softener** - The main complication associated with narcotic pain medication is constipation. We recommend taking Colace 100mg twice daily as well as Milk of Magnesia 15cc with each dose of pain medication until a bowel movement. This is just a recommendation. If you have a home regimen, please continue with this post operatively. If you have not had a bowel movement by postoperative day #5, take a stimulant laxative (ex: senna, dulcolax, fleet enema).

### **Post -Operative Guidelines:**

#### **ACTIVITY**

1. We encourage you to walk regularly after surgery and take deep breaths. You may wake feeling pressure in your chest, this is normal. Continue to breathe deeply. Taking deep breaths prevents post op lung problems. Early and frequent ambulation will prevent blood clots in your legs and decrease healing time.
2. You will want to sleep on your back for at least the first two weeks after surgery.
3. Avoid activities that make your pulse or heart race to prevent re-bleeding. Post-surgical bleeding can occur up to 10 days after any surgery.
4. Heavy exercise is prohibited for 3 weeks. When you do resume exercise, you will want to wear a snug, supportive sports bra.
5. You may do arm exercises (without weights) to prevent them from becoming stiff. Try to lift your arms out to the side several times per day, slowly working towards lifting your arms above your head. Do not extend your arms above your head immediately after surgery to prevent tension on the incision. Remember, no lifting greater than 10-15 lbs.
6. Driving is permitted when you are no longer taking narcotic pain medications and feel you can safely and comfortably maneuver the car.

## **DRESSINGS**

1. After surgery you will have dressings in place. You may be placed in a surgical bra. If you are not placed in a surgical bra then you may wear a soft sports bra that clasps in the front. Wear your bra continuously except when sponge bathing.
2. You will have soft dressings in place that will remain intact until post op day 5-7. You may sponge bath with these dressings intact.
3. Dressings are usually removed between post op day 5-7. If your first office follow-up visit is within 7 days of your surgery date, leave your dressing intact until coming into the office. If you do not have an office visit within 7 days of surgery then you may remove your dressings on post op day 5. Once dressings are removed you may shower. Do not tub bathe for 3 weeks postoperatively. Mild soaps are recommended to decrease risk of skin irritation.
4. **IF** you have JP drains in your breast, please refer to this section regarding management of JP drains. It is okay to shower with JP drains in place. It is important to strip the drains as instructed by nursing. Stripping and recording output from your drains should be done every 8-12 hours. TIP: using hand sanitizer on your fingertips makes it easier to strip drains. Please review our website for JP drain commonly asked questions and how to strip drains <https://www.orseckmd.com/patient-info/> (how to manage drainage tubes at the bottom of the page)
5. Remember, drains will be ready for removal at different times during the healing process. The JP drains will be removed once the drainage in each individual tube is less than 25cc for a 24 hour period for 2 consecutive days. Once a drain is ready for removal, call our office and set up an appointment with the nurse to have it removed. Please note, once a drain is removed there may be some drainage from that site for the next several days until it heals in and this normal. You will want to apply Vaseline and a Band-Aid to site daily until it has healed. After a JP drain is removed, please wait 24 hours before showering. \*If you do not have JP drains in your breast then please disregard this.
6. If you have any external sutures, they are usually removed after 1 week.

## **General Information/Commonly Asked Questions:**

7. Avoid foods that you know cause gas or cramps. Ensure you have adequate protein intake postoperatively to facilitate healing. Drink plenty of fluids (8-10 glasses/day) for the first week to keep well hydrated.
8. Pain medication may cause nausea, if you experience this take anti-nausea medication prior to taking pain medication and avoid taking on an empty stomach.
9. Generally you can return to work in 1-2 weeks after surgery.

10. We advise patients to wait to purchase new bras until 8-12 weeks post-operatively. This is so that the sizing is accurate after swelling has resolved. Also, no wire bras are to be worn for at least 6 weeks, in order to allow incision to heal adequately.
11. Sensation changes are very common in the nipples and scar areas. You may experience numbness or tingling or may be extra sensitive, due to regeneration of the nerves. The areas should return to baseline sensation within 3-6 months.
12. When you call to make your follow-up appointment, please remind our staff of your surgery date and type of procedure so that you will be given a correct appointment date and time.
13. You may start scar treatment/scar cream 3 weeks post op once incisions are healed if you do not have any open wounds.

CALL THE OFFICE IMMEDIATELY IF YOU EXPERIENCE ANY OF THE FOLLOWING:

- A high fever, (over 101°) severe nausea and vomiting, continued dizziness or incoherent behavior, such as hallucinations.
- Any pain that cannot be controlled by your pain medication.
- Bright red skin that is hot to the touch.
- Excessive bleeding or fluid seeping through the incisions.

If you have routine questions or concerns, please call the office at (864) 560.6717. In case of emergency, call 911.