

Post-Surgical Instructions: Breast Reconstruction with TRAM flap

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

The following instructions are your obligation. Use this as a checklist of progress as you heal. Included are normal post-surgical experiences and key health considerations that may be a cause of concern.

TYPICAL POST-OPERATIVE SYMPTOMS

Typical symptoms of breast reconstruction and signs to watch for following a TRAM Flap breast reconstruction include the following:

Tightness in the chest or abdomen and stiffness; tingling, numbness, burning or intermittent shooting pain:

These are normal experiences as the skin, muscles, tissue and sensory nerves heal. Pain medication and muscle relaxants will help you cope with any discomfort. If you have drains, you may experience additional localized discomfort. **Consistent sharp pain should be reported to our office immediately.**

Shiny skin or any itchy feeling: Swelling can cause the breasts or abdominal skin to appear shiny. As the healing process advances, you may also find a mild to severe itchy feeling of the breasts or at the abdominal incision site. An anti-histamine like Benadryl can help to alleviate severe, constant itchiness. Your umbilicus (belly button) may be red, purple, swollen or bruised. **If the skin becomes red and hot to the touch, contact our office immediately.**

Asymmetry, the breasts look different, or heal differently. Breasts may look or feel quite different from one another in the days following surgery. This is normal; no two breasts are perfectly symmetrical in nature or following breast reconstruction surgery.

OUR OFFICE SHOULD BE CONTACTED IMMEDIATELY IF YOU EXPERIENCE ANY OF THE FOLLOWING:

- A high fever, (over 101.5°) 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.
- A severely misshapen breast or bruising that is localized to one breast or region of the chest.

Do not apply any heat or cold to the surgical site.

Make certain there is no compression to your upper abdomen. This is the blood supply to your reconstructed breast.

You will also experience difficulty standing fully upright: Please do not try to stand upright, but maintain a bent position at the waist. Standing upright could greatly affect your results and could cause serious injury. A walker or crutches may be used if you require assistance.

- You should lift nothing heavier than 10 pounds for a minimum of 6 weeks after surgery.

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FOUR TO TEN DAYS FOLLOWING SURGERY

During this time you will progress with each day that passes. Ease into your daily activities. You will receive clearance to begin driving at approximately 3 weeks. The time frame it takes for patients to return to work is extremely variable. Some patients may return as soon as 4 weeks, while others may need to take 8 weeks. This will be discussed at your post-operative visits.

- **Continue to cleanse wounds as directed; you may shower.** Take a warm, not hot shower. Do not take a bath. Limit your shower to 10 minutes. Apply bacitracin ointment to your incisions (breast, abdomen, and umbilicus) 2 x daily then apply a gauze pad, and use tape to hold the dressing in place. Apply a fragrance free moisturizer to breast, abdomen and surrounding skin, however not on your incisions.
- **Continue to manage the drains, as directed.**
- **Take antibiotic medications and supplements as directed.** Take pain medication and muscle relaxants only as needed.
- **Wear your bra and support garments around the clock.**
- **Maintain daily walking.** Walking is essential every day to prevent the formation of blood clots.
- **Maintain a healthy diet. Do not smoke. Do not consume alcohol.**

TWO to FOUR WEEKS FOLLOWING SURGERY

As you resume your normal daily activities, you must continue proper care and healing.

- **Continue wound care as directed.** You no longer need to use gauze on the incisions, as the drainage has stopped. Continue to apply bacitracin ointment to the incisions 2 x daily. You may start gentle scar massage, several times daily.
- **You may wish to switch from prescriptive pain medication to acetaminophen.**
- **You will begin to be standing upright at this time.** In addition, you may begin stretching and range of motion exercises.
- **Do not smoke.** While incisions may have sealed, smoking deprives your body of necessary oxygen that can result in poorly healed, wide, raised scars.
- **Continue to wear a proper support bra.** The bra you first wore following surgery may feel somewhat loose. You may replace it, however **no under wires for 6 weeks**. You may sleep without a bra; however a camisole with built-in shelf support can be comfortable and provides added support as you continue to heal.
- **You may sleep flat.** However do not sleep on your stomach. If you are a side sleeper, a soft pillow under your mid-back and shoulders may offer more comfort and support than a single pillow under your head.
- **Practice good sun protection.** Do not expose your breasts or abdomen to direct sunlight. If you are outdoors, apply at least an SPF 30 to the chest area at least 30 minutes prior to sun exposure. Your chest region, breast skin and donor site are highly susceptible to sunburn or the formation of irregular, darkened pigmentation.

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SIX to EIGHT WEEKS FOLLOWING SURGERY

Healing will progress and your breasts will settle into a more final shape and position.

- **At 6 weeks, ease into light weight-bearing exercise.** No tennis, golf, softball or other sports with similar swinging motions. Avoid aerobic exercise that may cause a lot of bounce.
- **At 8 weeks, you may ease into your regular fitness routine.** However realize that your body may require some time to return to prior strength.
- **You may now start lifting things that are heavier than 10 pounds,** but be careful and if you start to feel a pulling sensation in your abdomen, you're probably lifting too much.
- **You may now use hand lotion or scar treatments (e.g. Mederma) on the incisions.** Massage the incisions vigorously 3 times daily, for several minutes each time.
- **You may resume wearing under wires,** although these are not necessary.
- **Discomfort or tightness and tingling will start to resolve.**
- **No need to resume smoking.** You have now gone 10 weeks (4 weeks prior to surgery and 6 weeks following) without a cigarette. For your long-term health, there is no need to resume smoking.
- **Nipple and Areola reconstruction can be scheduled as advised by Dr. Butterfield.** This may need to be postponed if you are receiving either chemotherapy or radiation therapy.

YOUR FIRST YEAR

- **Practice monthly breast self exam on the uninvolved breast.**
- **Continue healthy nutrition, fitness and sun protection.**
- **Your scars will continue to refine.** If they become raised, red or thickened, or appear to widen, contact our office. Early intervention is important to achieving well-healed scars. Scars are generally refined to fine incision lines one year after surgery.
- **A one-year post surgery follow-up is required.** However you may call our office at any time with your concerns or for needed follow-up.

Your body will change with age. The appearance of your breasts will change too. You may wish to undergo revisional surgery again in the future to help maintain your appearance throughout life. Contact our office with any of your questions or concerns, at any time.

I have read and understand all of the above instructions. I understand that following these instructions is solely my responsibility. I understand that it is also my responsibility to ask my doctor and his or her staff any questions I have related to these instructions or about my procedure, health and healing. These instructions are not meant to be comprehensive or all-inclusive, any additional instructions will be given to you by Dr. Butterfield as needed.