



Breast Reconstruction with Tissue Expanders

GENERAL POST OPERATIVE INSTRUCTIONS

- After your surgery, we will typically have you stay one night in the hospital for observation. The next morning, either Dr. Constantine or his PA, Megan, will come see you in the hospital to check on you, go over your post op and drain care instructions, and discharge you home.
- **WARNING: YOU CANNOT HAVE MAGNETIC RESONANCE IMAGING (MRI). You can have other imaging tests, such as a bone scan, computer tomography (CT) scan, or x-rays.**
- After surgery it is important to have someone available to stay with you for the first 24-48 hours after you are discharged from the hospital. You will be weak and may require help the first few times you get out of bed.

SLEEPING

- Go to bed with your head and shoulders elevated on at least 2 firm pillows (about 30 degrees). While in bed during your recovery, lie on your back, keep your head elevated. We recommend this position for about the first 3 weeks following surgery. No sleeping on your side while you have your drains in. Once your drains are removed, you may sleep on your side if needed.

ACTIVITY/EXERCISE

- You may have received arm exercises or stretches from your breast surgeon; you may do these daily as instructed. However, for the first 48 hours, keep your arm movements to a minimum and use assistance to get in and out of bed. Try to avoid using your arms to lift yourself in or out of bed without assistance for the first 48 hours. You may gradually resume normal daily activities, going on short walks around the block/around the house and resume household chores 48 hours after your surgery. Be careful to avoid any activity that causes increased pain or discomfort. **NO LIFTING OVER 10-15 LBS** for the first 6 weeks after surgery. You may resume strenuous exercise 6 weeks after surgery unless instructed otherwise by Dr. Constantine. Heart rate should stay below 100 beats per minute for the first 6 weeks and grand sweeping movements should be avoided. Please take frequent deep breaths to keep your lungs clear (15-20 per hour).
- **DO NOT SMOKE** or ingest any nicotine containing products (gum, e-cigarettes, etc.). This is very important for optimal wound healing.

SHOWER

- You may shower starting the day after surgery. Dr. Constantine places a special dressing (Prineo tape) over your incision that is impermeable to water. You can get soap and water over the incisions without any problems. This dressing will stay on for 2-3 weeks and can then be removed by one of our medical staff in the office.
- Soaking of the incision sites in a bathtub, hot tub, swimming pool or other body of water **should be avoided for 6 weeks** to allow proper healing to occur.

DRIVING:

- Driving may be resumed when a sharp turn of the steering wheel will not cause pain; this is usually within 7-10 days and when off all narcotics/muscle relaxers.

SPECIFIC POST OPERATIVE INSTRUCTIONS

YOUR POST OP PRESCRIPTIONS:

- Please take the pain medication as directed for the first 5-7 days (typically this is Hydrocodone, unless you reported an allergy to this medication, in which case you were most likely prescribed Tramadol instead). For the first week, we recommend you take this pain medication every 6-8 hours as needed for pain. Take it with food. After about a week, take this pain medication only if you have severe pain. If the prescription pain medication is too strong for your pain needs, over the counter ibuprofen (400-800mg every 6-8 hours) can be substituted.
- In addition, you were most likely given a muscle relaxant medication called Diazepam (also known as Valium). This medication can also be taken every 6-8 hours and is especially useful for muscle spasms and to help prevent the aggregation of the pain cycle.
- **In order to best combat your pain, we recommend you alternate your pain medication (Hydrocodone or Tramadol) and your muscle relaxer (Diazepam) every 3-4 hours.** For example: Take one Hydrocodone tablet with your breakfast in the morning and then 3-4 hours later take your muscle relaxer (Diazepam). Three to 4 hours after you take your muscle relaxer, you can take your second dose of Hydrocodone and so on.
- You should not be driving or operating heavy machinery while you are taking Hydrocodone, Tramadol or Diazepam as these are all controlled substances that can cause dizziness, drowsiness, and impaired judgement.
- **Pain medicine containing narcotics can cause constipation.** Occasionally this can be extremely uncomfortable and painful. To avoid this, over the counter Colace can help prevent constipation. Miralax and Magnesium Citrate can also be taken in more severe cases.
- You will be prescribed an antibiotic to take twice a day for 5 days after your surgery. While taking your antibiotics, it is important to take probiotics to avoid diarrhea and yeast infection. These can be bought over the counter in the form of pills or yogurt (Activa, etc.). It is important that you finish the entire course of your antibiotic prescription to prevent a postoperative infection.
- You were also most likely prescribed an anti-nausea medication called Ondansetron (this is also known as Zofran). Nausea and vomiting are common side effects of many antibiotics, narcotics, and muscle relaxers. If you are experiencing nausea or vomiting after taking any of your post op medications, you may take a Zofran tablet every 6 hours as needed (this medication is meant to be placed under your tongue so that it can dissolve in your mouth. Try to avoid swallowing it if you can, it works much better when dissolved under your tongue rather than swallowed.) You can take this medication 30 minutes before taking any medications that may cause you nausea/vomiting so that you are a step ahead of these potential side effects.
- **If you were taking Tamoxifen before your surgery, you may start taking this medication again two weeks after your surgery.**
- If you need a refill of your prescriptions, please call our office and let us know. We typically refrain from refilling pain medication and muscle relaxers as these can be habit forming. If over the counter Ibuprofen or Tylenol is not enough to control your pain, please call our office so that we can work with you to develop an appropriate pain regimen for your specific needs.

YOUR DRAINS:

- Frequently, small drains are used to draw off any accumulating fluid after surgery. Dr. Constantine or his PA will review with you and your family how he likes you to care for the drains and how to empty them correctly. The bulb should be kept compressed at all times. The drains should be stripped/milked 2-3x a day and the fluid will need to be removed from the bulb and measured 2-3x daily. Please keep a record of the time and how much fluid is emptied from each bulb in your drain log that was provided to you in your post op packet. Bring this record with you to the follow-up office appointment. Usually drains are removed within the first 1-2 weeks after surgery. Please refer to instructions on **Care of Your Drains** and Frequently Asked Questions.

SHOWER:

- You can **shower** starting 24 hours (1 day) after surgery. Use mild perfume/dye free soap and gently cleanse around the incision lines letting the soapy water run over the incisions. **Do not submerge the incisions under water (this means no baths, swimming, or hot tubs).** Gently pat the incisions dry.

BRA INFO:

- You will be sent home wearing a bra from your surgery. You should have “fluffs” given to you at the hospital to wear in the sides of the bra 24/7 while your drains are in and for at least one week once your drains have been removed to prevent fluid build up. You should wear your **surgical bra or a compression sports-bra** 24/7 for first 6 weeks after your surgery. You should have received a list of bras you can purchase from various websites/stores in your post op packet. You may take 30 minutes to 1 hour breaks from wearing your bra a couple of times a day as needed. You should also sleep in your bra for the first 3-4 weeks after surgery unless instructed otherwise. After 3-4 weeks, you may sleep without a bra but continue to wear one throughout the day. After 6 weeks, you are typically free to wear whatever bra you'd like (this includes underwire bras) or stop wearing a bra altogether unless instructed otherwise by Dr. Constantine.

INCISION CARE/SCARTREATMENT:

- You will have a clear tape over your incisions that will be removed in the office about 2-3 weeks following surgery. You may shower with this tape on as it protects the incision but **DO NOT** take a bath for the first 6 weeks after surgery.
- You will also most likely have drains covered with a clear bandage allowing you to shower without getting this area wet. Do not remove or try to change out your bandages at home. All bandages will be removed and changed when needed at the office during your appointments.
- Soaking of the incision sites in a bathtub, hot tub, swimming pool or other body of water **should be avoided for 6 weeks** to allow proper healing to occur.
- All incisions will be extremely sensitive to sunlight during the healing phase. Direct sun contact or tanning booths are to be avoided. Use of clinical grade sunscreen with SPF 30 and zinc oxide (UVA and UVB protection) is recommended for at least 6 months.
- Once the prineo tape is removed from your incisions and all incisions are healed with little to no scabbing, we recommend using silicone sheeting (Cica Care silicone strips or Scar Away which can be purchased from Amazon or CVS Pharmacy) or silicone cream/gel (Silagen is sold in our office or

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Silicone gel on Amazon) for 3-4 months to optimize healing/appearance. The addition of a hydrating cream and vitamin E cream will promote early softening and maturation of these areas as well.

WHAT TO EXPECT AFTER SURGERY

- Sensations like numbness, sharpness, and burning are common during the healing process. These sensations may last several weeks and will gradually disappear. In some cases, however, they can be permanent and a consequence of the mastectomy.
- Bruising and swelling are normal for 2-3 weeks. It will disappear over time.
- You may initially feel like your expanders are not in the correct position. This will resolve as the expanders are filled over the next few weeks and settle into the proper position.

EXPANSION

- Once the drains are removed, the breast skin appears healthy, and the incisions healed (typically around 2-3 weeks after surgery) we can start expanding you, if expansion is needed.
- Visits for expansion are generally once every 1-2 weeks, however the exact timing will depend on your specific needs. At each visit, the expander port will be located and saline will be injected using a small needle. Commonly, the area is numb and you will not feel the needle stick.
- The volume placed at each visit and total number of expansion visits depends on how easily your breast tissue accepts the added volume and how large you desire to be.
- A sensation of stretching or pressure is normal after expansion as the skins adapts to the new volume. This sensation only lasts for a few hours/days and can be temporally alleviated with over the counter acetaminophen (Tylenol) or ibuprofen (Advil).
- If you are due to undergo radiation treatment, it is important to let Dr. Constantine know this as soon as possible as it may impact the frequency and the volume we need to expand your breasts with before you start your radiation treatments. In certain cases, radiation changes or other skin issues may restrict your ability to continue with expansion. Dr. Constantine will discuss the options with you if limitations arise in your specific case.

IMPORTANT

- **WARNING: YOU CANNOT HAVE MAGNETIC RESONANCE IMAGING (MRI).** You can have other imaging tests, such as a bone scan, computer tomography (CT) scan, or x-rays.
- **If you have nausea, vomiting, rash, shortness of breath, or diarrhea after taking your medications, please call our office.**
- **If you develop a fever (oral temperature greater than 100 degrees), redness and/or increased pain at surgical incision sites, please call Dr. Constantine.**

- **If you have major dental work or major surgery, please notify Dr. Constantine so he can prescribe a pre-operative medication to protect your implants from possible infection.**
- **Your surgical sites may have less feeling. Do not put a heating pad or hot or cold compress on them. This is to prevent burn or damage to your skin.**

If you have any questions, please call Dr. Constantine's office at 214-739-5760.