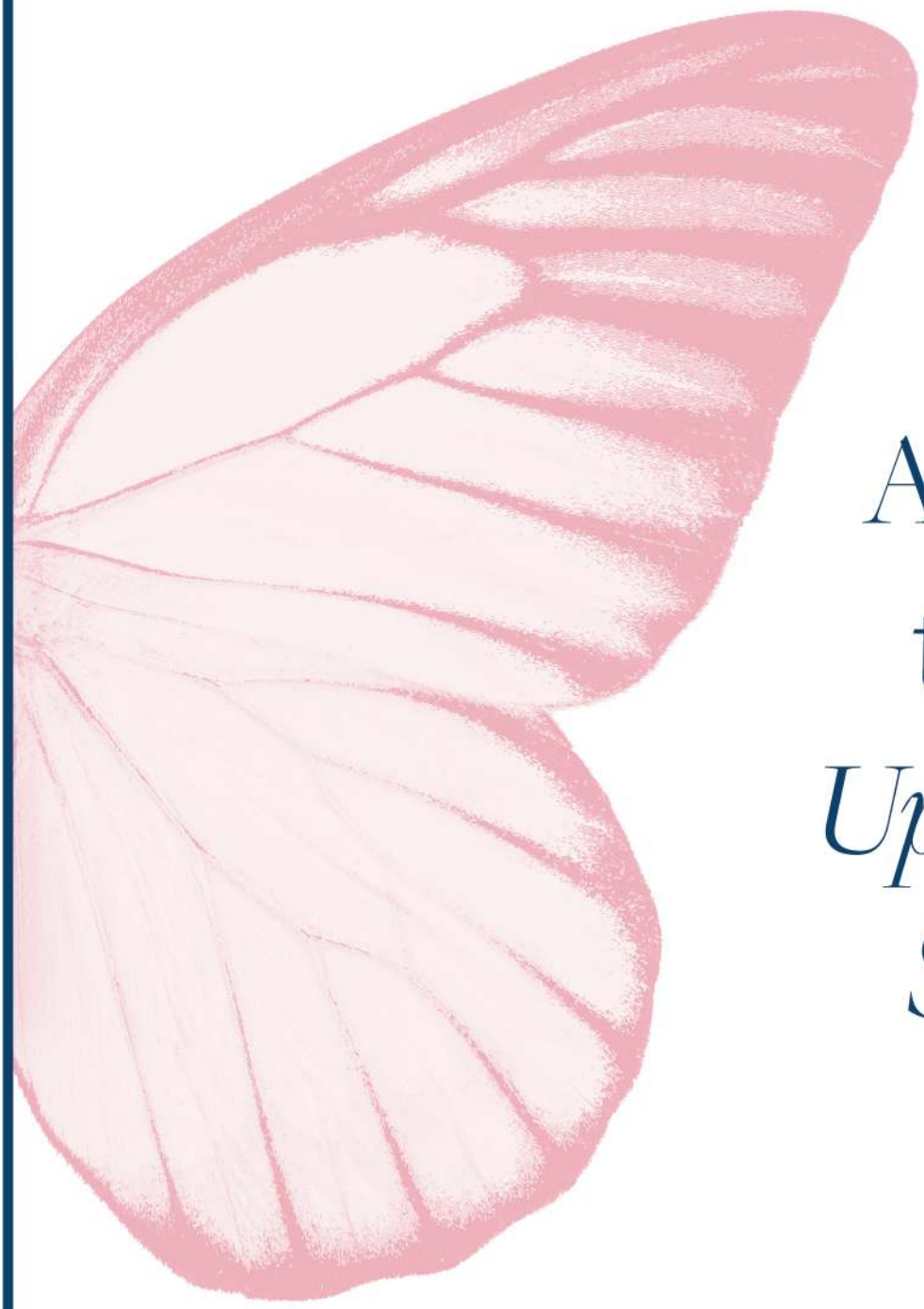

A Guide to Your *Upcoming Surgery*

FRIEDMAN CENTER

FOR BREAST AND LYMPHATIC SURGERY

| *feel whole again* |

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Welcome to the Friedman Center for Breast and Lymphatic Surgery

Thank you for choosing the Friedman Center for Breast and Lymphatic Surgery for your upcoming surgical procedure. We take pride in providing you the highest quality of care in a safe environment. We understand that undergoing a surgical procedure can be stressful. Our health care team is dedicated to ensuring that your experience with us is a positive one.

Please use this helpful guide to familiarize yourself with the process. This guide will provide information on how to prepare for your surgery, what to expect once you arrive at the hospital, and how to plan for your care after surgery. You will also find contact information for our surgical facilities.

This guide will be useful during each of your visits. Please bring it with you. If you have any questions about your upcoming surgery or hospital stay, do not hesitate to ask your physician or our clinical team. We also have a patient navigator who can help guide you through the process.

Your Surgery Information

Contact Information:

Patient's Name:

Surgeon's Name:

Surgeon's Phone:

Physician Assistant (PA):

Physician Assistant Phone and Email:

Primary Care Doctor:

Primary Care Doctor's Phone:

Pre-Surgical Testing Appointment:

Location:

Date: / / Time: AM / PM

Day of Surgery:

Location:

Date: / / Time: AM / PM

First Postoperative Appointment:

Location:

Date: / / Time: AM / PM

Secondary Procedures:

Location:

Date: / / Time: AM / PM

Your Surgery Information

Northwell Health Surgery Locations:

☐ **Center For Advanced Medicine**
450 Lakeville Road
Lake Success, NY 11042
+1 (516) 734-8900

☐ **Glen Cove Hospital**
101 Saint Andrews Lane
Glen Cove, NY 11542
+1 (516) 674-7300

☐ **Huntington Hospital**
270 Park Avenue
Huntington, NY 11743
+1 (631) 351-2000

☐ **Long Island Jewish Forest Hills**
102-01 66th Road
Forest Hills, NY 11375
+1 (718) 830-4000

☐ **Long Island Jewish Medical Center**
270-05 76TH Avenue
New Hyde Park, NY 11042
+1 (718) 470-7000

☐ **Northshore University Hospital**
300 Community Drive
Manhasset, NY 11030
+1 (516) 562-0100

☐ **Peconic Bay Medical Center**
1300 Roanoke Avenue
Riverhead, NY 11901
+1 (631) 548-6000

☐ **Southside Hospital**
301 East Main Street
Bayshore, NY 11706
+1 (631) 968-3000

☐ **Syosset SurgiCenter**
240 Jericho Turnpike
Syosset, NY 11791
+1 (516) 496-6400

☐ **Other** _____

_____

Your Surgery Information

Type of Surgery:

☐ **Inpatient Surgery** means you will be admitted to the hospital. You will remain in the hospital for one or more days until you are ready to go home.

☐ **Outpatient Surgery** means that you will come to the hospital the day of your operation and go home that same day.

Anticipated Length of Hospital Stay: _____ Days

If you have any questions about your upcoming surgery or hospital stay, do not hesitate to ask your physician or our clinical team.

Before Your Surgery

Pre-surgical Testing:

Depending on your surgical procedure, you may require a physical exam and some diagnostic tests such as bloodwork, chest X-rays, EKG, stress tests or other kind of medical studies. Your surgeon will tell you what tests you need.

Either our pre-surgical testing office staff will call you to schedule an appointment or your surgeon's office will schedule it for you. If you would prefer to make the appointment yourself, let your surgeon know, and then call your surgical location to connect with the pre-surgical testing office.

Your pre-surgical testing has been scheduled for _____.
If you need to change your pre-surgical testing date, please notify your physician's office.

If your testing is done at a Northwell Health pre-surgical site, the results will be forwarded automatically to us. If your pre-surgical testing is done elsewhere, you must ensure that we receive the reports at least 7 days prior to the date of your surgery.

Before Your Surgery

Medicines to Discontinue Before Surgery:

Please tell your surgeon about any medication you are taking for any reason, including prescription drugs, over-the-counter medications, and vitamins and herbal supplements.

Typically, you will be asked to stop taking medication at least one week before surgery. **Take your medications as instructed by your primary care physician and pre-surgical testing, and follow these general guidelines:**

- **AVOID** taking Aspirin, Advil, Motrin, Aleve, Naprosyn (Naproxen) or any other non-steroidal anti-inflammatory medication for at least 10 days prior to your surgery.
- You may take Tylenol if you have a headache or other pains that require pain medication.
- **AVOID** taking fish oil, vitamin E, and herbal supplements unless approved by your surgeon.
- To help ensure adequate wound healing, please discontinue taking Tamoxifen 4 weeks prior to your surgery. You may resume taking it two weeks after your surgery.

Before Your Surgery

Smoking

DO NOT smoke, drink alcohol, or use recreational drugs.

Smoking and nicotine gum increase your risk of complications, and both take time to leave your body. Additionally, inhaling smoke irritates the breathing passages and may lead to respiratory problems during and after surgery.

Hygiene

DO NOT use deodorant, powders, lotions, or moisturizing body washes/soaps the morning of surgery. Dial or Hibiclens antibacterial soap is preferred.

DO NOT shave for at least 2 days prior to surgery or the day of surgery.

Food Intake

Have a light meal the night before surgery, as most patients do not move their bowels for several days after surgery.

DO NOT eat or drink anything after midnight the night before your surgery.

You may take certain prescribed medications with a sip of water on the morning of your surgery. Please check with your primary care doctor as to which medications are acceptable.

DO NOT eat breakfast or drink any liquids the morning of surgery.

The Day of Surgery

Checking In:

Please report to the hospital location indicated on page 4 at your scheduled and confirmed time of surgery. Plan your travel accordingly.

Personal Items:

Northwell Health is not responsible for lost, misplaced, stolen or damaged property. If you are being admitted, your clothing and other personal items will travel with you from the operating room area to your assigned. Patients who are having same-day surgery will be assigned a locked cabinet in which to place their belongings. It is strongly advised that you leave valuables at home.

DO NOT bring/wear the following:

- Jewelry or valuables
- Contact lenses
- Body jewelry
- Body lotion
- Makeup

While in the Hospital

- Immediately post-op you will be given IV fluids and a combination of pain medications. In some cases, a long acting nerve block is performed in the operating room, minimizing the need for narcotic pain medications.
- You will start on clear liquids and progress to a regular diet as tolerated. As soon as you are eating regular foods, you will be offered oral pain medication and weaned off of the IV pain medication.
- You will wake up with a catheter. The catheter will be removed within 24 hours once you are mobile and can walk to the bathroom by yourself.
- You will have several drains in place to remove any excess fluid from the surgical sites and surrounding tissues. The drains will be emptied frequently in the hospital. You will be expected to empty your drains and record the drainage at home. The hospital nursing staff will educate you and provide you with a measuring cup for home use.
- The first day after surgery, the nursing team will help you get out of bed and ask you to sit in a chair. We encourage you to start walking as soon as possible. Walking helps reduce swelling and lowers your chance of developing blood clots.
- You will be given stool softeners and maybe a mild laxative to help you move your bowels, since narcotics cause constipation.
- Patients are typically discharged on the second or third day following surgery, depending on the type of breast reconstruction surgery performed. Some patients will be discharged sooner.

After Your Surgery

Breast Reconstruction Post-Operative Instructions

DRAINS:

- You will have 1–2 Jackson Pratt (JP) drains at each breast mastectomy site; flap reconstructions will have 2 additional JP drains at the donor tissue site. It is normal for drainage to change in color, consistency and amount, from bright or dark red to clear, yellowish, or pink. The drains are removed at your physician's office, generally 1–3 weeks after surgery, depending on the amount of fluid that drains from the surgical site. It is important that you empty the drains twice a day and record the output (refer to JP Drain Care Instruction Guide).
- You may take a shower with the drains. Take a warm—not hot—shower, and please limit your shower to no more than 10 minutes while the drains are in place. Avoid extreme water temperatures; your sensation is altered post-surgery and you may inadvertently burn yourself.
- Please refrain from taking tub baths until your drains are removed, your wounds are healed, and your surgeon gives you permission to do so.

After Your Surgery

MEDICATIONS:

- You will be prescribed a narcotic pain medicine (usually Percocet) that you can safely take if you experience severe pain. This medication can cause dizziness, so please exercise caution when taking it (i.e., no driving or operating dangerous machinery). Percocet can cause constipation, so your doctor may recommend an over-the-counter stool softener such as Colace.
- You may choose to take Tylenol (acetaminophen) for pain instead of the narcotic medication. Take note that Percocet already contains Tylenol (acetaminophen). Do not exceed 400 mg of Tylenol from all sources in a 24 hour period.
- If you go home with a drain, you might be given a prescription for an antibiotic, usually Keflex or Cipro, that you will take while the drain is in place.
- Alcohol is not advised while taking prescription pain medicine and antibiotics.

After Your Surgery

- Your incisions are held together by dissolving stitches. The stitches will be covered with special surgical glue that does not require any special care. This glue should not be peeled off; it will fall off on its own 2–3 weeks after surgery. No separate wound care is required for your incisions. **DO NOT** apply antibiotic ointment or cream (such as Bacitracin) to the incisions—it will prematurely dissolve the surgical glue. Application of ointments and lotions is not necessary and not recommended.
- **DO NOT** massage your incisions unless you are given permission by your physician.
- Postoperatively, we encourage walking but no heavy lifting (nothing greater than 5-10 lbs.) or strenuous activities for 6 weeks after surgery.
- Restrict excessive use of your arms for at least 5–7 days, and do not lift your arms over your head for the first few weeks.
- After your first post-operative visit, you will be allowed to start Reach to Recovery upper extremity exercises. If necessary, we will arrange for you to start physical therapy in the coming weeks after surgery.

After Your Surgery

- **DO NOT** drive while taking pain medication. You should not drive for 3–4 weeks after surgery because of the risk of seat belt injury if you have to stop the car suddenly or turn to avoid an accident. Do not drive until you have full range of motion with your arms.
- **DO NOT** apply ice or heat packs to any of your surgical areas. The skin that has been operated on cannot dissipate cold or heat very well. This could lead to severe burns or tissue necrosis (tissue death) of the surgical area.
- **DO NOT** wear an underwire bra for at least the first 6–8 weeks or longer after surgery and until your surgeon approves you to do so.
- Implant patients will leave the hospital wearing a post-surgical compression bra. This bra should be worn 24/7 until your first follow-up appointment with your surgeon. Your physician may approve you to wear a loose-fitting sports bra after that. It is not necessary for flap patients to wear a bra, but if you desire to do so, you may wear a loose-fitting sports bra 2-4 weeks after surgery. Instructions for wearing a bra may vary depending on the type of reconstruction, your breast size, and wound healing. Please verify instructions with your care team.
- **DO NOT** put pressure on your chest or sleep on your chest for 3 months after surgery. You can only sleep on your back or your side.
- You can eat a regular diet 24 hours after surgery. Adequate hydration and a high fiber diet will help with constipation.
- **DO NOT** smoke. Smoking delays wound healing and increases the risk of wound complications. Smoking can also increase your chances of developing pneumonia and clots in the legs after surgery.

After Your Surgery

What to Look Out For:

If you experience any of these symptoms or other worrisome symptoms, please contact your plastic surgeon's office immediately:

- Excessive bleeding
- Excessive redness
- Severe pain
- Excessive swelling
- Unusual drainage
- Discoloration of any of the surgical sites
- Increased drain output
- Bright red blood in drain
- Fever >100.3° F
- Chills

If you have not already scheduled a post-operative follow-up appointment, please call the office at 516-224-2350 as soon as possible to set up your appointment.

Notes

Notes