**FAQ’s AFTER BREAST SURGERY**

**Q: What are normal, expected post-operative changes after breast surgery?**

**A:** It is normal to have: bruising, swelling, some drainage of yellow, light pink, or even bright or dark red fluid on your dressings, pain at the operative and drain site controlled with medication, fatigue, nausea and/or vomiting from anesthesia that improves in 1-2 days, sore throat.

**Q: What warning signs should I be looking out for after breast surgery?**

**A:** Please call if you have any of the following: temperature > 101.5 oF, redness, warmth, significant drainage of pus or blood, one side swelling significantly more than another, implant/expander exposure, shortness of breath, chest pain, calf pain, dizziness, fainting, blurry/double vision, pain not adequately controlled with pain medication, severe headache, severe diarrhea.

**Q: When can I shower?**

**A:** Dr. Wu’s patients: Shower permitted after 24 hrs, over clear plastic waterproof dressing that is covering the incision and drain. If the blue disc around the drain site gets wet, OK to trim the plastic around the drain, remove the wet blue disc, and just dress the drain site with dry gauze and paper tape. Leave the majority of the clear plastic dressing on the breast until clinic.

Dr. Roughton’s patients: Shower permitted after 24 hrs, over clear plastic waterproof dressing that is covering the incision and drain. If the blue disc around the drain site gets wet, OK to trim the plastic around the drain, remove the wet blue disc, and just dress the drain site with dry gauze and paper tape. Leave the majority of the clear plastic dressing on the breast until clinic.

Dr. Damitz’s patients: If you have drains, you may not shower. You may wash up with a wash cloth. If you don’t have drains, you may shower in 48 hrs.

Dr. Bhatt’s patients: Shower permitted after 24 hrs, over clear plastic waterproff dressing that is covering incision and drain. If the blue disc around the drain site gets wet, OK to trim the plastic around the drain, remove the wet blue disc, and just dress the drain site with dry gauze and paper tape. Leave the majority of the clear plastic dressing on the breast until clinic.

**Q: When can I get in a tub or go swimming?**

**A:** Dr. Wu’s patients: No immersion into a tub, pool, ocean, lake, hot tub for 4 weeks, or while there are open wounds.

Dr. Roughton’s patients: No immersion into a tub, pool, ocean, lake, hot tub for 4 weeks, or while there are open wounds.

Dr. Damitz’s patients: No immersion into a tub, pool, ocean, lake, hot tub for 4 weeks, or while there are open wounds.

Dr. Bhatt’s patients: No immersion into a tub, pool, ocean, lake, hot tub for 4 weeks, or while there are open wounds.

**Q: How often will I need to change my dressings?**

**A:** Dr. Wu’s patients: If you have a clear plastic dressing on leave plastic dressing on until your first post op visit, where it will be removed.

Dr. Roughton’s patients: If you have a clear plastic dressing on leave plastic dressing on until your first post op visit, where it will be removed. Leave Steri-strips in place.

Dr. Damitz’s patient: Keep your dressings as clean and dry as possible. You may remove your dressings 48 hours after surgery. You may take your dressing off to shower if able and no drains. You will be instructed on this.

Dr. Bhatt’s patients: Leave the disc and clear plastic dressing over the drain in place. The incision site will be super-glued shut; no need to touch it. Keep a few pads between the incision and the bra.

**Q: How do I care for my drain?**

**A.**

***a. Stripping the tubing:***

Strip the tubing when there is backup of fluid. Pinch the tubing where it is close to the skin with one hand to stabilize the drain. Using the other hand, pinch with the thumb and index finger just below the stabilizing hand and “strip” the fluid out of the drain, into the bulb. You will see the tubing go flat as the fluid is emptied out of the tubing into the drain. Do this whenever you see backup of fluid or tissue in the drain.

***b. Emptying the bulb:***

Empty the bulb 1-2 times daily, or when the bulb is no longer compressed, whichever comes first. Uncap the stopper (the one with the tab that is NOT connected to the tubing), to release the negative pressure inside. Empty the fluid into a measuring cup. Record the volume on a sheet of paper. With the bulb still squeezed (so it is flat), recap the stopper, so that it remains flat. The drain will NOT work if it is round. Do this with each drain individually. DO NOT combine drain outputs together in one measuring cup, each drain has to be measured and recorded individually.

BRING YOUR DRAIN LOG TO CLINIC as it is the only way we will know if your drain is ready to be removed.

***c. Duration of drain:***

In general, the drain stays in for 7-10 days, depending on the output. It will come out when the drainage is less than 30 mL in 24 hrs

**Q: When can I start doing my arm physical therapy exercises?**

**A:** Dr. Wu’s patients: Only after the drains have been removed by the plastic surgery clinic, and only after clearance by the plastic surgeon.

Dr. Roughtons’ patients: Three days after drains come out.

Dr. Damitz’s patients:

Dr. Bhatt’s patients: I decide on a case by case basis. Just ask me.

**Q: When can I start wearing a regular bra, not the surgical bra I was given after surgery?**

**A:** Dr. Wu’s patients: pushup bra with molded cup permitted at 2 weeks post op (underwire permitted). No sports bras for the first month post op. After clearance for running and weight lifting at 1 month, OK to wear a sports bra (see next FAQ).

Dr. Roughtons’ patients: Each patient is different. In general, 4 weeks around the clock, then 2 more weeks at nighttime.

Dr. Damitz’s patients:

Dr. Bhatt’s patients: Depends on the type of incision you have and how your incisions are healing. Typically, 1 month after surgery. Just check with me first.

**Q: When can I resume working out and lifting weights with my arms?**

**A:** Dr. Wu’s patients: walking permitted right after surgery. Running or lifting weights > 5 lbs with arms, pushing, pulling not permitted until 1 month post op. After that, gradual increase in weight training (2.5lbs each arm at a time, increase if no pain or swelling in breast or arms) and running permitted as per patient tolerance.

Dr. Roughtons’ patients: Try to take it easy. Try to avoid any straining or lifting over 5 lbs, pulling, pushing, exercising, housework, straining, for 4-6 weeks. You may walk around, sit, and watch TV, etc, but NO MATTER HOW GOOD YOU FEEL, DO NOT CLEAN THE HOUSE, VACUUM, REARRANGE THE ATTIC, ETC! We do not want you to bleed and cause any more swelling and bruising, but more importantly too much strenueous activity too soon can negatively affect your final outcome.

Dr. Damitz’s patients: Try to take it easy. Try to avoid any straining or lifting over 5 lbs, pulling, pushing, exercising, housework, straining, for 4-6 weeks. You may walk around, sit, and watch TV, etc, but NO MATTER HOW GOOD YOU FEEL, DO NOT CLEAN THE HOUSE, VACUUM, REARRANGE THE ATTIC, ETC! We do not want you to bleed and cause any more swelling and bruising, but more importantly too much strenueous activity too soon can negatively affect your final outcome.

Dr. Bhatt’s patients: Try to take it easy. Try to avoid any straining or lifting over 5 lbs, pulling, pushing, exercising, housework, straining, for 4-6 weeks. You may walk around, sit, and watch TV, etc, but NO MATTER HOW GOOD YOU FEEL, DO NOT CLEAN THE HOUSE, VACUUM, REARRANGE THE ATTIC, ETC! We do not want you to bleed and cause any more swelling and bruising, but more importantly too much strenueous activity too soon can negatively affect your final outcome.

**Q: When do I start doing scar management?**

**A:** Dr. Wu’s patients: scar massage with cocoa butter and paper taping (both once-twice daily) permitted at 3 weeks post op. Continue until scar quality is acceptable. Remember that scars can take up to 1 year to mature fully.

Dr. Roughtons’ patients: Silicone sheeting preferred after steri strips (over the counter) removed.

Dr. Damitz’s patients:

Dr. Bhatt’s patients: Just check with me first because it depends on how the wounds are healing and what type of reconstruction (implant versus DIEP flap) you had. Typically, I wait 3 weeks at which point the skin glue dissipates, at which time you can do scar therapy. I like silicone sheeting. Do not waste your money on Mederma.

**Q: Is it normal for one nipple/one breast to be slightly higher/fuller/smaller than the other?**

**A:** Yes, there is always some degree of asymmetry after any breast surgery, and most of the time this is due to swelling. Over time, this will resolve, and if it persists, then discuss with your plastic surgeon after s/he feels that the swelling changes have subsided.

**Q: Is it normal for one nipple/one breast to feel numb/hypersensitive/more painful than the other?**

**A:** Yes. Anytime you have breast surgery, temporary numbness/hypersensitivity/pain can occur. This is due to the nerves regenerating, and is part of the normal healing process.

**Q: Are ice/heating pads needed for my breast after surgery?**

**A:** Usually neither are necessary.