



THE INSTITUTE FOR
ADVANCED BREAST RECONSTRUCTION

POST-OPERATIVE INSTRUCTIONS *following Scar Revision Surgery*

DRAIN CARE:

- Most of the time, drains are not used for scar revision. Depending on how much tissue is removed, you have one. Please ignore this section if you do not have any drains.
- Drains are in place to keep fluid or blood from building up at the surgical site.
- Empty and record the output (in mL or cc) from the drain AT LEAST twice per day (ideally at the same time each day), or more often if necessary.
- After you empty, compress the bulb as flat as you can to re-establish the suction •
- Strip the tubing AT LEAST twice per day to ensure its patency.
 - o First, make sure your hands are clean, washed with soap and water.
 - o Put hand sanitizer on your fingertips to facilitate a smoother, easier glide on the tubing and avoid the rubber-burn.
 - o With one hand, hold the tubing at the base (near the skin) and pinch and pull gently on the tubing, flattening the tube with the other hand. You can “milk it” towards the bulb to advance along the tubing from the base to the bulb.
 - o This will move the stingy material down the tube and prevent clots from forming. •

Drainage will start off bloody, then become more pink or clear as the days go on – this is a normal change.

- Do not let the drains hang freely, even when you shower. Hang something like a bathrobe belt, shoelace or lanyard around your neck and safety-pin the drains to it.
- Must bring the record of drainage amounts to your clinic appointment, so it can be determined whether the drain can be removed.

SURGICAL SITE CARE:

- Dressings will either include a clear tape covering a white gauze, or “skin glue” known as dermabond. If the dressing is the clear tape, please leave intact until your follow up. If you have “skin glue” then ok to shower.
- Any dressings on the breast should be maintained in place until follow up.
- NO PRESSURE ON THE CHEST - SLEEP ON YOUR BACK ONLY until instructed otherwise. • If your breast was operated on, OK for a loose bra. No underwire please. Front velcro or front zip bras are recommended for use.

- If your abdomen or thighs were operated on, you may have been placed in a compression garment. Please continue to apply compression with a binder or your recommended garment until follow up. If no compression was placed, then there is no need to wear unless it provides additional comfort for you.

PAIN MEDICATION:

- Use the prescribed narcotic pain medication as directed on the bottle. If no narcotics were prescribed, Tylenol and Ibuprofen can be used.
- If the pain is not severe, you should instead take plain Tylenol (if not contraindicated by other medical conditions).
- If you were prescribed Norco (Hydrocodone-Acetaminophen) or Percocet (Oxycodone Acetaminophen), make sure to monitor the total amount of Acetaminophen (Tylenol) within 24 hour period. DO NOT exceed total of 4000mg of Acetaminophen (Tylenol) in 24 hours, which will cause damage to your liver health. Of note, each tablet of Norco and Percocet include 325mg of Acetaminophen (Tylenol).
- Taper off the narcotic pain medication as the pain decreases
- It is normal to feel pain and stiffness during the first 1-2 weeks after surgery, but after this point your pain should continue to improve each day.
- If a muscle relaxant was prescribed, use this intermittently between pain medication doses to help with tightness and muscle spasm

OTHER MEDICATION:

- Stool softener: If you experience constipation as a common side effect of taking narcotic pain medication, try over-the-counter stool softeners such as Colace, Miralax or Dulcolax at your preferred local drugstore.

ACTIVITY RESTRICTIONS:

- DO NOT sleep on surgical sites
- No strenuous activity/exercise or lifting more than 5 pounds for total of 6 weeks post-op. • Avoid unnecessary bending or twisting at the waist.
- Do not resume house work or aerobic exercise until instructed to do so.
- Walking is a healthy form of exercise and is encouraged – Try to walk a little at least 3x daily.

DIET:

- Resume normal diet

BATHING/SHOWERING:

- OK to shower if skin glue was used. IF there is a clear tape over the dressing, please leave intact and do not get wet.
 - You may gently wash the surgical sites with mild soap and water, but DO NOT scrub incision sites.
 - Gently pat to dry after showering to make sure all incision sites are dried adequately. •

NO tub baths, hot tubs or swimming until instructed by Dr. Srinivasa

FOLLOW-UP:

- You should have a follow up appointment arranged and reflected on your Kareo patient portal. If you can't locate one, please call our office to schedule an appointment for post-op check.

- **The Institute For Advanced Breast Reconstruction Locations:**
#818-336-1295 Fax #818-337-1285

Thousand Oaks Office Location:

415 Rolling Oaks Drive, Thousand Oaks, CA 91356

(Suite 220, 2rd Floor)

Parking outside, free.

Santa Monica Office Location:

1260 15th Street, Santa Monica, CA 90404

(Suite 1109, 11th floor)

Attached garage, parking fees apply.

Please call the office (818-336-1295) if you have any of the following symptoms:

- Fever higher than 101° F
- Sudden and rapid swelling at the surgical site
- Bleeding you believe to be excessive
- Persistent nausea/vomiting or inability to keep fluids down
- Pain not controlled by prescribed medications
- A foul odor or increasing redness/swelling/drainage at your incision
- If you have any questions or concerns

Dr. Srinivasa is available by email for all non-urgent questions or concerns. Her email address is IABRconcierge@gmail.com. Urgent issues after hours can be called in to (818)927-0267