



THE INSTITUTE FOR
ADVANCED BREAST RECONSTRUCTION

Breast Reconstruction with Implant or Expander Post-Operative Instructions

SURGICAL SITE CARE:

- Keep the surgical dressings and bra on at all times, as is – clean & dry – for 1 week.
- **Sponge bath only for 1 week.**
- OK to shower after 1 week (*after all dressings are removed*)
 - Dressings will be removed at your first post-op appointment with Dr. Srinivasa.
 - If your first visit is greater than 10 days out, please remove dressings in one week by peeling the clear wrap. The dressings underneath can also be removed.
 - Ok to gently clean with saline and gauze.
- After showering, apply a thin layer of Vaseline along the incision lines daily.

If you have surgical drains, please follow:

Detailed instructions can be found on the last page

- These should be “stripped” multiple times per day.
- The drain bulbs should be emptied multiple times per day.
- Please measure the drain output in (mL) and record.
 - **The drainage needs to be less than 20 (mL/cc) per day (24 hours) for two consecutive days in order to be removed.**
- Pain at the drain site is common, and the skin can become irritated or red. This is normal. OK to apply Vaseline or Aquaphor.

Please keep in mind that wrinkled skin and bruising is normal. Removal of the breast during Mastectomy is a big surgery and can cause notable bruising and wrinkling of the skin.

ACTIVITY RESTRICTIONS:

- **Sleep on back only – DO NOT sleep on surgical sites** for 6 weeks post op.
- Resume normal daily activities EXCEPT any strenuous activity/exercise for 6 weeks post-op.
- No lifting more than 5 pounds for 6 weeks post-op.
- Walking is a healthy form of exercise and is encouraged.
- No driving for at least 3 weeks post-op and all patients **must be off any narcotic pain medications.**

PAIN MEDICATION:

- Use the prescribed narcotic pain medication as directed on the bottle.
 - If the pain is not severe, you should take plain Tylenol or Motrin instead (*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 a 24 hour period.**
 - **DO NOT exceed a total of 4000 mg of Acetaminophen (Tylenol) in 24 hours**, this will cause damage to your liver health. **Each tablet of Norco and Percocet includes 325mg of Acetaminophen (Tylenol).**
- It is normal to feel slightly more pain and stiffness on the 2nd or 3rd day after surgery, but after this point, your pain should continue to improve each day.
- Taper off the narcotic pain medication as the pain decreases – typically starting on the 4th day after surgery
- If a muscle relaxant was prescribed, use this intermittently between pain medication doses to help with tightness and muscle spasm.

OTHER MEDICATION:

- **ANTIBIOTICS** - If you were prescribed antibiotics to take after surgery, please start the first dose after dinner.
 - **If you had any fat grafting done or an implant/tissue expander placed, you should have received an antibiotic. If not, please call the office for a prescription.**
- **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.

Please call the office at (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 incisions**
- *** IF after hours or on weekends, please call: (818) 927-0267.**

FOLLOW-UP INFORMATION:

You should have a follow up appointment arranged and reflected on your patient portal (Kareo). If you can't locate the information online, please call our office (818) 336-1295.

Office Contacts & Business Hours:

Business Hours: 8:00am-4:00pm (PT) Monday-Friday

- **Phone: (818) 336-1295 & Fax: (818) 337-1285**
- **Taylor** (Medical Assistant) - Email: iabrmedical@gmail.com
- **Mariah** (Surgery and Appointment Scheduling) - Email: iabrconciierge@gmail.com
- **Alicia** (Insurance/Payment Info) - Email: iabrclinical@gmail.com or Direct Phone Number: **(818) 336-1159**.

Office Locations:

- **Thousand Oaks Office Location:**
 - 415 Rolling Oaks Drive
Thousand Oaks, CA 91356
(Suite 220, 2nd 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 Note:

- Dr. Srinivasa is always available on her personal cell phone, but ***we request that all non-emergent issues be communicated with the office first.*** This includes questions about garments, therapy, non-emergent surgical concerns etc.
- After business hours and on weekends, feel free to send us an email or leave a voicemail. If it is urgent, Dr. Srinivasa checks her email after hours and on weekends. If she does not respond in a timely manner and it is after hours or on a weekend, please reach out to her on her cell phone. The google voice number on our voicemail can also connect you to her personal cell phone.

DRAIN CARE INFORMATION:

Drain(s) 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. Add up the total output amount per 24 hour period.
- 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.
- Must bring the record of drainage amounts to your clinic appointment, so it can be determined whether the drain can be removed.

How to “Strip” the Tubing:

- First, make sure your hands are clean, washed with soap and water.
- Put hand sanitizer on your fingertips to facilitate a smoother, easier glide on the tubing and avoid the rubber-burn.
- With one hand, hold the tubing at the base (near the skin). Then 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. *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.