UW Medicine

Mastectomy CareMap

Before, during, and after your hospital stay

- May include axillary sentinel node
- Without reconstruction
- Without axillary node dissection

Before Surgery Day of Surgery	Discharge or Day 1
Before Surgery Day of Surgery 7 Days Before Before Surgery P Plan for your ride to the hospital and back home. If you usually take blood thinners such as Lovenox or Cournadin, talk with the Hospital Take a 2nd shower with the antibacterial soap, as prescribed. If you usually take blood thinners such as Lovenox or cournadin, talk with our care team. We may want to adjust your does around the time of the surgery. Check in at the Surgery Registration Desk at or before your scheduled arrival time. Stop taking supplements and vitamins. Pre-Anesthesia staff will tell you which medicines to take on the morning of surgery. We will check your blood sugar. 2 Days Before You will meet with: - An amesthesiologist to talk about anesthesia Stop taking near the surgery site, if needed. - A member of the surgery team so that you can ask questions and sign a consent form (if not already signed) Stop shaving near the surgery site, if needed. - Nurses to review your health history Day Before - You will wake up in the recovery room. You will: - Have drains to remove fluid from the surgery area - Receive pain medicine by IV or by mouth, and anti-nausea medicine as needed Wo will move you to a room on a care unit when ready. - Belf-care and Activity - Do NOT reata ny food or drink any alcohol after midnight. - Do NOT riates your arm above shoulder height on the side of your surgery. <t< td=""><td> Once your pain is under control, you will be discharged from the hospital. This could be the same day as surgery or the next morning. Your follow-up visit with your surgical team will be set up before you leave the hospital. Medicines Your pain will be controlled by: Acetaminophen (Tylenol) and/or ibuprofen (Advil, Motrin) Opioid pain pills, as needed (always take with food) While you are taking opioids, also take the medicine prescribed for constipation (unless you have loose stools). Discharge Total State of the medicine prescribed for constipation (unless you have loose stools). </td></t<>	 Once your pain is under control, you will be discharged from the hospital. This could be the same day as surgery or the next morning. Your follow-up visit with your surgical team will be set up before you leave the hospital. Medicines Your pain will be controlled by: Acetaminophen (Tylenol) and/or ibuprofen (Advil, Motrin) Opioid pain pills, as needed (always take with food) While you are taking opioids, also take the medicine prescribed for constipation (unless you have loose stools). Discharge Total State of the medicine prescribed for constipation (unless you have loose stools).

Week 1	Weeks 2-3	After Drains Removed
Medicines	Medicines	Medicines
 Pain controlled by: Acetaminophen and ibuprofen Opioid pain pills, only as needed (always take with food) Begin to taper dose of opioids While you are taking opioids, keep taking the medicine prescribed for constipation (unless you have loose stools). 	 Pain controlled by acetaminophen and ibuprofen Goal is to be off opioids by now 	Pain controlled by acetaminopher and ibuprofen
 Self-care and Activity Walk every day, going farther each day. Until drains are removed, move your arms gently: Do NOT raise your arm above shoulder height on the side of your surgery. Do NOT lift anything that weighs more than 8 pounds (1 gallon of water weighs more than 8 pounds). This includes children and pets. Do NOT vacuum, do laundry, or do other chores. Empty each drain 2 to 3 times a day. Record each drain amount separately in your log. Always bring your log with you to your clinic visit. Keep following instructions in the "Stretches and Exercises" handout. Do NOT drive while taking opioids.	 Self-care and Activity Walk every day, going farther each day. Keep following instructions in the "Stretches and Exercises" handout. Until drains are removed, move your arms gently: Do NOT raise your arm above shoulder height on the side of your surgery. Do NOT lift anything that weighs more than 8 pounds (1 gallon of water weighs more than 8 pounds). This includes children and pets. Do NOT vacuum If you still have drains, empty each of them 2 to 3 times a day, record each amount separately in your log. Call the clinic to have a drain removed when output for that drain is less than 30 ml in 24 hours for 2 days in a row. 	 Self-care and Activity Walk every day, going farther each day. Until you see a physical or occupational therapist (PT or OT), keep following instructions in the "Stretches and Exercises" handout. When your surgeon says it is safe: You may start PT/OT and massage 1 week after your last drain is removed. Start doing more exercise. Build slowly. Let your body guide you. If an activity causes pain, slow down or stop! Start using your arms more fully.
 Follow-up Visits Visit with breast surgeon and/or Advanced Practice Practitioner (APP Talk about pathology report (you may receive results by phone before Device any received if a start base theory and a day 		Drop weight limits. Questions or Concerns? Your questions are important. Call your care team if you have questions or concerns.
 Drains are removed, if output less than 30 ml a day If needed, talk about seeing medical or radiation oncologist for more treatment Receive prescription for physical therapy (PT) or occupational therapy (OT), but do not use it until at least 1 week after all drains are removed 		 SCCA Breast Health Clinic: 206.606.7563 UWMC Breast Clinic - Northwest Campus: 206.668.6746 For urgent needs after hours: You can also call your clinic any time of the day or night. Ask to speak with the provider on call.