

Activities of Daily Living After DIEP Surgery

This handout gives guidelines to follow after your DIEP surgery. Follow these guidelines to protect your flap and incisions and to help your recovery.



*Scan with your
phone camera for
a digital copy of
this handout.*

Types of DIEP Surgery

DIEP surgery is either *unilateral* (1 breast) or *bilateral* (both breasts). **You will need to follow the instructions for:**

- ☐ Unilateral (1 breast)
- ☐ Bilateral (both breasts)

If you are not sure which surgery you had, please ask your care team to help you mark the correct box above.

Protect Your DIEP Flap

Follow these instructions for **4 weeks** after surgery, or until your care team tells you otherwise. If you had **unilateral** surgery, follow these directions for the arm on your surgical side. If you had **bilateral** surgery, follow these directions for both arms.

- Do not lift, push, or pull anything that weighs more than 8 pounds (a gallon of milk weighs almost 9 pounds).
- Do not reach higher than shoulder height (90 degrees) in front of you and out to the side.
- Do not reach behind your body except when using the toilet. (*See page 3*)
- Do not do any *aerobic exercise* which raises your heart rate. Do not do repetitive arm movements such as chores (vacuuming, dishes, and laundry).
- Do not wear clothes that put pressure on your breasts.
- Avoid straining, holding your breath, and bearing down.

Movement Tips

Standing up from a bed, chair, and toilet:

- Do not use your surgical-side arm(s) to push up from armrests to stand. Lean forward and use your momentum to stand. If you need help to stand up, your caregiver should assist from your hips, **NOT** your arms.
- It is harder to stand up from low, deep, or soft surfaces such as a soft recliner or couch. Try to sit on firmer, taller surfaces that are comfortable for you to stand up from.
- Your *occupational therapist* (OT) may advise you to use a raised toilet seat at home if your toilet is too low.

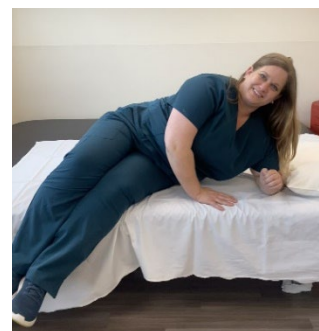
Getting into bed:

1. Sit down near the top third of the bed. Aim to sit far back from the edge of the bed. Do not use your arms to scoot back or push yourself.
2. Lie down on your side. Do not try to brace yourself with your arms.
3. Stay on your side. Keep your knees bent while you lift your legs onto the bed.
4. Keep your hips and knees together while you roll onto your back.

Getting out of bed:

Bend your knees and roll onto your side.

- **If your surgery was unilateral:** You may push to get up using only your non-surgical arm. *See the photo on the right for an example.*
- **If your surgery was bilateral:** Do not push up with your arms. Your caregiver should slide their arm behind your shoulder and help you sit up as you move your legs off the bed. *See the photo on the right.*



Unilateral: Push yourself up only with your non-surgical arm.



Bilateral: Do not push yourself up. You will need help from your caregiver.

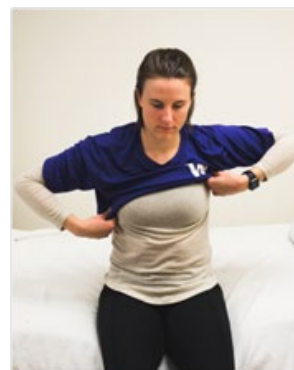
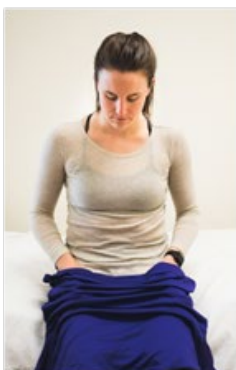
Getting Dressed

Button-down shirts and jackets:

- **If your surgery was unilateral:** Put your surgical-side arm in your sleeve first. Then use your non-surgical arm to bring the shirt around your back and put your other arm in.
- **If your surgery was bilateral:** Put one arm into your sleeve. Ask your caregiver to bring your shirt around your back and help put your other arm in.
- Another option is to button the 3 lowest buttons of your shirt. Then put it on over your head like you would put on a t-shirt (*see instructions below*).

Pullover T-shirts and tank tops:

- **If your surgery was unilateral:** Put your arms through the shirt sleeves in front of you, dressing the surgical side first. Then use your non-surgical arm to pull the shirt over your head and down in the back. Do not reach behind your back with the surgical arm to pull down your shirt.
- **If your surgery was bilateral:** Put your arms through the shirt sleeves in front of you. Then bunch up the back of the shirt and push it over your head. Be careful to avoid lifting your elbows higher than 90 degrees (shoulder level). Do NOT reach behind your back to pull down your shirt. (*See below.*)



Pants and underwear:

- You may pull your underwear and pants up over your drain insertion sites. Check to make sure the drain lines are not kinked or bent.
- Pull up pants and underwear **only** in the front and the sides. Do not reach behind your back. You may need help to pull your pants up in the back, especially if they are tight.
- You may want to wear compression shorts or leggings for comfort. These can go over your drains as well. If they are difficult to pull up, you may need help.

Socks and shoes:

- To avoid falling, sit down to put on your socks and shoes.
- To avoid bending at your abdomen or waist, bring your foot up to you. This movement may be more comfortable while you are healing.

Bathroom Tips

Using the toilet:

- You may reach behind your back **only** for toileting hygiene.
- Your OT may advise you to use a toilet aid device, a bidet, or peri bottle to make it easier to reach and clean yourself.
- Do not strain, hold your breath, or bear down with bowel movements.

Showers:

- You can shower after your DIEP surgery. Have someone help you the first few times you shower, until you feel sure about your safety.
- Attach your drains to a lanyard or necklace and wear it around your neck. This will help prevent your drains being tugged or falling.
- It is okay for soap and water to run over your incisions and drains. Avoid scrubbing these areas and gently pat them dry. Do not submerge your incisions until fully healed (do not take a bath or sit in a hot tub).
- You can wash your hair and face by tucking your head down and lifting your arms in front of you to reach your head. Be careful that you do not lift your elbows higher than your shoulders.
- When washing your underarms, only lift your arms up to shoulder height.
- Your OT may suggest that you use a shower chair or tub transfer bench if you feel unsteady on your feet or get dizzy.

Questions?

Your questions are important. Call your doctor or healthcare provider if you have questions or concerns.