This handout gives self-care instructions to follow at home after having DIEP (deep inferior epigastric perforator) flap breast reconstruction.

**Activity**

For **4 weeks** after your surgery:

- Do **not** lift anything that weighs more than 10 pounds. (A gallon of milk weighs almost 9 pounds).

- Move your arms very gently:
  - Do **not** raise your arms above waist level to the side.
  - Do **not** raise your arms above shoulder level to the front.
  - Do **not** reach behind you.
  - Do **not** push or pull anything.

- Walk every day. This will help your recovery.

- Do **not** do any exercise that makes you breathe hard or makes your heart beat faster.

- Do **not** drive until:
  - It is more than 4 weeks after surgery; **and**
  - You have stopped taking prescription pain medicine.

- Do **not** wear clothes that put pressure on your breasts. But, we advise wearing snug clothes around your abdomen, such as bicycle shorts, yoga pants, or Spanx shapewear. This will help lower the amount of fluid your body retains.

- Do not take a bath, sit in a hot tub, or go swimming until all your incisions are fully healed.

- Shower every day. Allow soapy water to gently run over your drain sites and incisions. Gently pat dry with a clean towel.

- When you sleep, lie on your back, with your legs and head slightly raised. Do this until you come to the clinic for your first follow-up visit.

Call your nurse or doctor if you have any of the symptoms listed on page 3 of this handout.
Dressings and Drains

- Read the handout “Caring for Your JP Drains” to learn how to take care of your drains, and how to measure output.
- If output from one of your drains is less than 30 cc in 24 hours for 2 days in a row, call 206.598.1217 to schedule a clinic visit to have the drain removed.

Doppler Wires

The Doppler wires are held in place with white tape called Steri-Strips. The wires will stay in place until your doctor takes them out. This is usually done at your 2-week follow-up visit.

If the wires become loose, use more surgical tape to keep them in place. You can buy this tape at most drugstores.

Pain Medicines

- You may take one of these non-prescription non-steroidal anti-inflammatory drugs* (NSAIDs) as needed for pain:
  - 600 mg ibuprofen (Advil, Motrin, and others) every 6 hours
  - 500 mg naproxen (Aleve, Naprosyn, and others) 2 times a day
* IMPORTANT: Do not take NSAIDs if you have had gastrointestinal (GI) bleeding or gastric bypass surgery, or if your doctor has told you not to take these drugs.
- You may also take 650 mg acetaminophen (Tylenol and others) every 6 hours.
- For strong pain, take your prescription pain medicine as needed. These medicines are called opioids, and may have names such as Oxycodone, dilaudid, or Vicodin. As your pain gets better, use less of this medicine each day and use non-prescription pain medicine instead. This is called tapering.
  
  To taper your prescription pain medicine, you can:
  - Take a smaller dose each time you take it.
  - Take it less often.
  
  Call the clinic nurse if you have any problems tapering your dose of opioids. (See phone numbers in the “Questions” box on page 3.)
- Opioids can cause constipation. If needed, take a stool softener (such as docusate) and a laxative while you are taking this medicine.
Follow-up Visit
You have been scheduled for a follow-up visit with your surgeon or the surgeon’s PA (physician assistant) or an ARNP (advanced registered nurse practitioner).

- Please bring your drain output record to this visit.
- If you need to change this appointment, call the plastic surgery scheduler at 206.598.1217 as soon as you can.

When to Call
Call Right Away
If you have a major change in the color of your “flap” skin or have new swelling in your breast:

- **Call 206.598.6190 right away** and ask to page the resident on call for Plastic Surgery.
- **Do not eat or drink anything** until you talk with the Plastic Surgery resident on call and find out what to do. If you need to take medicines, take them with only small sips of water.

Other Care Needs
Call the clinic nurse if you have:

- Bleeding or drainage that soaks your dressing (hold pressure on the site to lessen bleeding)
- A fever higher than 100.5°F (38°C)
- Shaking and chills
- Any sign of infection at your incision:
  - Redness
  - Increased pain
  - Bad-smelling drainage
  - Increased drainage
- Nausea, vomiting, or both
- Shortness of breath or ongoing leg pain (see the handout, “Preventing Deep Vein Thrombosis After Surgery”)
- Concerns or questions that cannot wait until your follow-up visit

Please see phone numbers to call in the “Questions” box on this page.