Regional Flap Reconstruction

What to expect and how to prepare

This handout explains the most common flap donor sites that are used at University of Washington Medical Center (UWMC) to reconstruct after surgical removal of skin, fat, muscle, or skeletal support. At the Center for Reconstructive Surgery, our goal is to help your body maintain as much form and function as possible.

What is regional flap reconstruction?

A regional flap reconstruction is a procedure that involves moving healthy tissue from one part of your body (donor site) to repair a defect (recipient site). A regional flap moves tissue while maintaining the blood flow from the donor site.

Activity restrictions for ALL flap surgeries

- For 6 weeks, avoid aerobic exercise (activities that cause heavy breathing or sustained elevated heart rate).
- Do not lift anything that weighs more than 8 pounds (about the weight of a gallon of water). This includes children and pets.

Recipient flap site _____

Restrictions:

- For 6 weeks, avoid compression to the site that received the flap (the repaired site). Avoid sleeping on surgical sites.
- _____
- _____
- _____
- _____
- _____

Donor Sites

Drains

You will likely have drain(s) placed at your donor site at the time of surgery. We will teach you how to care for them. Please read the handout "Closed Bulb Drain Care: For a Jackson-Pratt (JP) or Blake Drain" to learn more.

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Back

☐ Latissimus Flap (Lat Flap)

The latissimus muscle is on your upper back. Surgeons remove the blood supply and move muscle, fat, and sometimes skin to cover the upper chest or back.

Restrictions:

- Do not push, pull, or lift anything heavier than 8 pounds (about the weight of a gallon of water) for 4 weeks after your surgery.
- Do not raise your arm above shoulder height on your surgical side for 4 weeks after your surgery.
- Avoid raising your arm past 45 degrees to your side. Avoid closing your arm less than 30 degrees toward your body. We recommend keeping a pillow under your armpit to avoid pressure on the blood flow.

Abdominal

☐ Rectus Flap (TRAM or ORAM Flap)

The rectus abdominis muscle is in your abdomen next to your belly button. This can include the transverse rectus abdominis muscle or oblique rectus abdominis muscle. Surgeons keep the blood supply attached and move muscle, fat and sometimes skin to cover the groin or other local abdominal defect.

Restrictions:

- Do not push, pull or lift anything heavier than 8 pounds (about the weight of a gallon of water) for 6 weeks after your surgery.
- Avoid any abdominal straining or abdominal exercises for 6 weeks after your surgery.
- We recommend compression to your abdomen. This includes wearing snug clothes around your abdomen, such as bicycle shorts, yoga pants, or Spanx shapewear. If you are placed in an abdominal binder, please wear it 24/7 for the first 6 weeks after your surgery. You may remove it for showering and laundering. Compression will help lower the amount of fluid your body retains.

☐ Omentum Flap

The *omentum* is made up of fat, connective tissue, and lymphatics that connect the stomach to other abdominal organs. Surgeons remove part of this apron-like fold to cover bony prominences or medical devices/hardware, or when operating in the lymphatic system.

Restrictions *(for omentum flap)*:

- Do not push, pull or lift anything heavier than 8 pounds (a gallon of water) for 6 weeks after your surgery.
- Avoid any abdominal straining or abdominal exercises for 6 weeks after your surgery.

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Lower Extremity

☐ Anterolateral Thigh Flap (ALT Flap)

The *anterolateral* thigh flap uses skin, fat, and blood supply from your outer thigh and can be used to cover large defects (often on the arm). You will have a vertical incision along the outside of your upper leg.

Restrictions:

- Do not move your leg in a way that puts tension on your incision such as crossing one leg over the other. Keep your legs in a neutral position.
- Avoid bending at your hip (sit, step, squat) more than 90 degrees for 6 weeks after your surgery.

☐ Gracilis Flap

The *gracilis muscle* is in your inner thigh and can be used along with skin and fat to cover upper or lower extremity areas. The area is closed primarily with an incision along the groin line and/or vertically along the inner upper leg.

Restrictions:

- Do not move your leg more than 45 degrees away from your body (for example, wider than shoulder width) for 6 weeks after your surgery.
- Avoid bending at your hip (sit, step, squat) more than 90 degrees for 6 weeks after your surgery.

Other

☐ Singapore Flap

This procedure uses the blood supply and fat from the inner thigh and groin for vaginal reconstruction, perineal wound closure, or rectovaginal fistula repair.

Restrictions:

- Do not move your leg more than 45 degrees away from your body (for example, wider than shoulder width) for 6 weeks after your surgery.
- Avoid bending at your hip (sit, step, squat) 90 degrees for 6 weeks after your surgery.
  - Sit in a “beach recliner” position.
  - Side-sit to avoid direct pressure to your perineum

Pain Control

- Please read the handout “Pain Control After Reconstructive Surgery.”
- Do **not** use ice or heat directly on your surgical sites.

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When to Contact the Care Team:

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/or chills
- Any signs of infection at your surgical site
  - Redness
  - Increased swelling
  - Bad-smelling drainage
  - Pus or cloudy-colored drainage
- Nausea and/or vomiting
- New rash
- Pain that is worsening and is no longer helped by your pain medicine

If you are experiencing new chest pain or shortness of breath, please call 911.

Please go to the ER (emergency room) if you experience any of these: redness, swelling, pain/cramp, or warmth usually in one limb. Any of these may be signs of a blood clot.

Questions?

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

During Clinic Hours (Monday through Friday except holidays, 8am to 5pm):
If you have any questions or concerns, message your surgeon through MyChart. Please include a photo if it will help explain your concern.

You may also call the Center for Reconstructive Surgery at 206.598.1217, option 2.

Urgent Needs Outside of Clinic Hours:
If you have an urgent care need after hours, on weekends, or on holidays, please call 206.598.6190 and ask to speak to the plastic surgeon on call.

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