
Timeline for Breast Reconstruction

Implant Expander

1. First stage placement of expander (Can be at time of mastectomy or afterwards)
2. Weekly visits for percutaneous expansion in the office(6-8 weeks)
3. No intervention for at least 6-8 weeks. The tissue needs to soften. If chemotherapy treatment was performed additional time is needed and may not be completed for 3-4 months after completion of chemotherapy. Chemotherapy delays wound healing.
4. Second stage exchange of expander for permanent implant as outpatient.
5. No intervention for 7-9 months
6. Tattoo areola (pigmented portion of nipple) in office at 9-12 months
7. Third stage reconstruction of papule (raised portion of nipple) as outpatient
8. Fourth stage mastopexy of contralateral side.

TRAM FLAP

1. First stage Delay of TRAM flap by ligating inferior epigastric artery as outpatient (ideally 2 weeks in advance of mastectomy)
2. Second stage TRAM flap after mastectomy as inpatient and postoperative follow up.
3. No intervention for 7-9 months
4. Third stage MAY require liposuction as outpatient for symmetry at 9 months
5. Tattoo areola (pigmented portion of nipple) in office at 9-12 months
6. Third stage reconstruction of papule (raised portion of nipple) as outpatient
7. Fourth stage mastopexy of contralateral side.

DRAIN INSTRUCTIONS

How to empty the Jackson Pratt drain:

1. Wash your hands and unpin the drain from your clothes.
2. Hold the drain with the stopper at the top.
3. Remove the stopper from the pouring spout and let the drain fill with air.
4. When the drain is fully expanded, read the amount of fluid in the drain by using the lines on the side of the drain.
Note: Each line has a number next to it, 25, 50, 75 100 ml. This is the amount you will record on the drainage chart. If you cannot see the number, count the number of lines and record it on the chart as line 1, line 2, line 3 and so on.
5. Pour all of the liquid out into a paper cup.
Note: To prevent infection DO NOT let the spout or the top of the open drain touch anything.
6. Now, use one hand to squeeze the sides of the bulb together. This will push all of the air out of the bulb. While keeping the bulb squeezed, use your other hand to put the stopper back into the spout.
Note: Keeping the bulb squeezed together helps to remove drainage from under the skin.
7. Pin the drain back onto your clothes. This will help prevent the drain from being pulled out by mistake.
8. Write down the date, time and amount of drainage and bring this record to your first doctor's visit.
9. Discard the fluid into the toilet.
10. Wash your hands.

Tissue Expander/Breast Reconstruction Surgery



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How should I prepare for surgery?

Complete all pre-testing and lab work 3 weeks prior to your surgery.

Antibiotics will be prescribed. Please alert the physician of any allergies to medications.

Fill your prescriptions prior to your surgery. Antibiotics will be started the day before surgery. All others is for after and during the fill process.

Pain medication is prescribed to alleviate your discomfort.

Aspirin and products containing some must be avoided 2 weeks prior to procedure. Tylenol may be used as a substitute.

Notify the doctor if you or any family members have had any blood coagulation problems.

No alcohol 24 hours prior to surgery.

No smoking. Smoking does delay wound healing.

You may consider Zofran to prevent nausea. Your insurance may not pay for it. Ask the doctor for a prescription.

If you think you may have difficulty sleeping, Tylenol PM may be used.

You should purchase a white front closure sport bra and bring it with you to the hospital.

If you care for family or pets, please make arrangements to have assistance for the first 7 to 10 days.

You may want to begin taking yogurt with active cultures daily following surgery. Antibiotics can be tough on your digestive system.

Comfortable, loose fitting pajamas and clothing that button in the front, rather than pull-over your head, are recommended following surgery.

Call the office to report any illness or cold symptoms within one week of surgery.

No food or liquid after midnight the night before surgery. These precautions are necessary for anesthesia.

Make arrangements for transportation to the office after surgery. You will need to take your muscle relaxer medication prior to each expansion session. You may require 4-6 appointments at weekly intervals.

The night before surgery, wash with soap from neck to waist. Do not apply deodorant, cream, or powder to your body the day of your surgery.

Remove nail polish. For acrylic nails, remove acrylic on right index finger.

What Should I Expect The Following Day(s) After Surgery?

Rest in semi-sitting position with head elevated on 2 pillows.

Pain medication will be provided in the hospital every 4 hours through injections or by mouth.

Alcohol must be avoided while taking pain medication.

No smoking.

Measure and record all output of drains. Please notify us if drains aren't functioning properly. You may try to squeeze some antibiotic ointment near the drain insertion site to seal it. You will be given instructions on the technique of "milking the tubes" to promote proper drainage. We ask you to do this **three** times a day. (Direction on back on how to empty drains).

Unusual pain, swelling, redness, drainage and fever should be reported.

Take medications as directed. No aspirin or aspirin containing drugs for 2 weeks. Avoid driving a vehicle or doing work requiring heavy concentration while taking these medications.

Your sport bra will hold your dressings in place. Unfasten bra and check area for unusual swelling or bruising daily.

You are permitted to shower. Steri-strips may be dried by using a hairdryer on a low setting. Non-sterile gauze or Kotex may be used to cover wounds.

Drink plenty of liquids.

Do not do any heavy lifting or bending from the waist. This may increase pressure in the chest area. No lift greater than 8 lbs (a gallon of milk).

No swimming or hot tub use.

No tanning.