

Elite Plastic Surgery

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Implant/Tissue Expander-Based Breast Reconstruction *Post Operative Instructions*

What to Expect Immediately After Surgery:

1. After surgery, you will be brought to the recovery room. The expected length of time in the recovery room is approximately 1-2 hours. Your family/chaperone will be contacted when you have been transported to the recovery room.
2. A member of the plastic surgery team will speak with your family/chaperone regarding post-operative instructions, will answer any questions, and will provide updates on the course of the procedure.
3. This is typically an outpatient procedure. MOST of our patients go home the same day after surgery, although depending on your health status and comfort level, you may be kept in the hospital one to two days.

Post-Operative Instructions:

Drains may be placed during surgery. Instructions for drain care and how to record the volume of drainage will be reviewed with you by the recovery nurse at the surgery center. If you have any concerns about your drains or how to manage them please call our office. On average, drains are removed 2-3 weeks after surgery but may stay in as long as 4 weeks. Drains are removed when output falls below 30 mL in 24 hours.

1. **Diet:** You may resume your pre-operative diet after surgery. It is always a good idea to start with clear liquids, and then advance to full liquids and regular food as tolerated. Please plan protein-rich meals after surgery as this helps with healing and reducing swelling. You may not be very hungry after surgery so plan to eat protein with each meal, supplement with protein smoothies or the Thorne College Peptide and Thorne Daily Greens.

Attempt to increase fluid (six cups of water) and fiber intake to prevent constipation as this is a known effect of anesthesia and narcotic pain medication. Stool softeners should be taken with narcotic pain medication.

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2. **Activity:** To lower the risk of bleeding, swelling, and separation of your incisions, restrict your activity for the first week. Please do not plan to increase your heart rate or blood pressure by exercising for the first two weeks after surgery. We will discuss increasing your activity at your 1-week follow-up.

You should not lift greater than five pounds unless otherwise indicated; these restrictions should continue until they are removed at follow-up visitations. Resumption of exercises should only begin after clearance from your surgeon. The surgeon does increase your activity throughout your 6-week post-op period. You are usually able to return to normal activity after 6 weeks.

Two risks of surgery include blood clots and pneumonia.

To prevent blood clots you are encouraged to ambulate 5 minutes every 2 hours while awake on the day of surgery and throughout the week. You may also want to invest in compression stockings while you are recovering.

To prevent pneumonia you are encouraged to make a conscious effort to take deep breaths every few hours. You should also cough to open up your lung bases. This may be uncomfortable for the first few days after surgery. To help with comfort you may grab a pillow and hold it close to your chest to provide a small amount of pressure when coughing.

3. Plan to sleep elevated with 3 or 4 pillows behind your back for 1 week.
4. Bathing: You may shower on post-operative day two. No bathing or submerging in water (ie: pool, whirlpool, hot tub, etc.) for 4 weeks. It is advisable to pat dry the incision area gently prior to applying new soft padding to the area.
5. **Pain:** During the surgery, you will be injected with a long-acting local anesthetic to provide pain relief. In addition, pain medication will be prescribed and available as needed. We provide different types of medications that address different types of pain. We provide medication that helps relieve nerve pain, muscle pain, and anti-inflammatories. We do provide narcotic pain medication but encourage you to start the medications that address the **specific type** of pain medication, which will help you come off the narcotic pain medication sooner. It is suggested to fill your prescriptions before surgery to provide a more relaxed post-operative course. Aspirin should not be taken unless specifically prescribed by your surgeon.
6. Follow-Up Schedule: The first post-op follow-up appointment will occur the week following surgery. Contact information for the follow-up appointment will be given to

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you. You are encouraged to make the follow-up appointment before the surgery. Normal follow-up routine includes office visits weekly for the first couple weeks and then at one month post-operatively.

Expansion process: Your breasts may be flat at the beginning if you have tissue expanders placed. Some patients do wake up with air or saline-filled expanders immediately after surgery. Usually, there will be no expansion for the first 2 weeks, as the tissues are healing. Eventually, air will be removed and replaced with saline. The expansion amount per visit will depend on how tight your skin is and your comfort level. Please plan to visit the office every week or every other week for the expansion process, for approximately 4 sessions.

If you had a mastectomy and the surgeon went direct to placing an implant please know these take several months to settle. They will change in shape and size as the settling phase progresses.

7. Incisions: Sutures are most often internal and not visible on the surface. Typically they dissolve on their own with time. In some situations, there may be some external sutures that may or may not require removal. We will remove and care for sutures as necessary in clinic. Incisions may show mild signs of redness and inflammation for the first four months post-operatively. This is normal and should resolve with time. It is normal to have some oozing from the wound edges in the initial post-operative period. Wound care and scar care instructions will be based on how healing progresses as assessed at clinic visits. Do not place ointment or other products over incision lines until instructed by your surgeon.

PLEASE DO NOT PLACE ICE PACKS OR HEATING PADS ON OR NEAR ANY SURGICAL SITES DUE TO ALTERED SENSATION AND INABILITY TO FEEL WHEN TOO HOT/TOO COLD!!!

8. Dressings: Dressings are simple and consist of medical-grade glue, soft padding to absorb any oozing from the wounds. Do not pick at or attempt to remove the glue. It will fall off with time. Replacing padding daily keeps the area clean and dry.
9. Post-Operative Bra: The breasts should be supported with minimal movement for 2 weeks. A lightly compressive front closure sports bra/bralette should be worn. Please DO NOT wear any bra with an underwire for at least 6 weeks. There should be no direct or prolonged pressure on the breasts for 2 weeks. This means no sleeping on your tummy or sides, only on your back.

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10. **Work:** You are normally advised to take four weeks off from work, although an earlier return to work is possible depending on your occupation and recovery. The recovery period could take longer if there are complications after the surgery.
11. Please plan to bring a front closure shirt to the surgery center. Plan to wear front closure attire for the first week as it will be uncomfortable to raise your arms overhead.
12. Please have patience as it can take up to 6 months or longer for the implants to fall into their pockets. Typically you will have a good idea of what your breast will look like after 6 weeks of healing.

Medications Prescribed (not all medication may apply)

Please take all your medications as prescribed.

Scheduled Medications: Please take these medications as scheduled

Antibiotic: Keflex (cephalexin) 500mg (started day of surgery, is a SCHEDULED medication, please follow the prescription ordered) is an antibiotic you must take for a total of 5 days. (Note that antibiotics may impair birth control pills.)

(*May not apply to you) Blood thinner: Lovenox 30 mg/0.3 ml injectable solution (started day AFTER surgery) is used for the prevention of blood clots after surgery. You or your caregiver will administer 1 subcutaneous injection into your thighs daily for 5 days.

Tylenol (Acetaminophen) (Age GREATER than 60: 1000 mg every 8 hours) (Age LESS than 60: 1000 mg every 6 hours)

As needed: These medications are scheduled “as needed” per your pain level. We provide you with many types of medications that focus on the “type” of pain you are experiencing. If you plan to take more than one of these medications, please plan to take them at least 2 hours apart as they can make you sleepy.

Toradol (ketorolac): 10 mg every 6 hrs = 15 tabs

Type of Pain relief: Anti-inflammatory: Swelling/Pain: (started day of surgery as needed, please follow prescription ordered) This is a different form of Ibuprofen so please stay away from other anti-inflammatories while taking this medication.

Gabapentin (Neurontin): 100 mg; every 8 hours = 48 tabs (16 days)

Type of Pain relief: Nerve Pain: Itching/Burning/Tingling/Numbing/Sharp: (started day of surgery as needed, please follow the prescription ordered) is used for pain relief every 12

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hours. Please let us know if you are taking any prescriptions for mood-altering (depression or bipolar) medications as these can potentially interact.

***this medication can make you sleepy, please do not plan to drive on this medication**

Cyclobenzaprine (Flexeril): 5 mg; every 8 hrs = 10 tabs

Type of Pain relief: Muscle Relaxer: Muscle spasms/Muscle cramping: (started day of surgery as needed, please follow prescription ordered) is a muscle spasm medication.

***please do not drive while on this medication**

Oxycodone (Narcotic Pain Reliever): po every 4-6 hours as needed = 30 tabs

Type of Pain Relief: General pain (started day of surgery as needed, please follow the prescription ordered) is an oral narcotic prescribed to manage your pain.

***please do not drive while on this medication**

Docusate Sodium (Colace): Stool Softener: every 12 hours = 14 tabs (7 days)

Senna: Bowel Stimulant: every 12 hours = 14 tabs (7 days)

You may take the Colace and Senna together.