

NORTH YORK GENERAL

Post Op Instructions

Oncoplastic Lumpectomy Based Breast Reconstruction

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Postoperative Dressing & Support

- At the end of your surgery, your incisions will be covered with sterile dressings, possibly including steri-strips (white tapes).
- You may be wrapped with a supportive elastic tensor bandage or garment to support your breast. Please do not remove or try to peek at your results.
- This dressing should remain in place for approximately 3 days. After 3 days, carefully remove the bandage and any gauze.
- The steri-strips should be left on the incisions; they will gradually loosen and fall off over 1-2 weeks.
- During this period, you may shower gently using soap and water. Do not submerge the wound in water (pools, hot tubs, baths).
- Once the dressings and tape come off, if necessary, you will be advised on scar care.
- If you are NOT in a tensor wrap and in a bra or Tegaderm dressing, please keep everything intact until your first follow up
- Wear a supportive sports type bra (nowires) during the day and at night after your first follow up and continue with this support for 4 weeks.
- If you have drains they will be removed likely at your first follow up
- Typically we avoid making a CCAC referral for this as you can manage and record the outputs on your own and it avoids a needless trip to the centre during your recovery
- If you need or require a CCAC referral we can make one on your behalf

Wound & Incision Care

- Occasionally, small amounts of blood or fluid may seep onto the steri-strips. This is normal.
- For bleeding that leaks under the tape, apply a clean gauze dressing. If bleeding persists, contact us immediately.
- All sutures are underneath the skin and do not need removal. Any visible knot will dissolve over time.
- If a stitch or knot remains after 2 weeks, you may carefully cut it with sterile scissors. Just a small tug on the loop of suture and cut at the base of the knot like a piece of hair.



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Pain Management

- You have been prescribed **Tylenol Extra Strength, Celebrex (Celecoxib), and Hydromorphone**.
- Take Tylenol regularly, every 6 hours. Celebrex should be taken every 12 hours, and Hydromorphone as needed, but no more than every 6 hours.
- These medications are effective for managing postoperative pain; discontinue them once discomfort subsides.
- All pain meds can cause constipation. To prevent this, consider using **Colace** twice daily and an OTC laxative such as **Milk of Magnesia** if needed.
- Stay well-hydrated and eat high-fiber foods.

Eating After Surgery

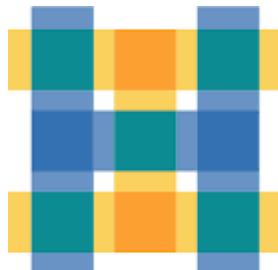
- You may experience nausea from anesthesia. Start with clear fluids (apple juice, tea, soda).
- Gradually advance to light foods like broth, crackers, or toast, then to your regular diet as tolerated, usually by the next day.
- If nausea persists, over-the-counter anti-nausea remedies such as **Gravol** can be used, with your doctor's guidance.

Potential Complications & Warning Signs

- **Hematoma:** A swelling that develops within 24-48 hours, causing pain and firmness. This may require urgent evaluation and possibly drainage.
- **Bruising:** Expect some discoloration, which is normal and usually subsides within two weeks. Some bruising can last longer or appear to spread as it resolves.
- **Infection:** Signs include increasing redness, warmth, swelling, foul-smelling drainage, or persistent fever. Contact us immediately if these occur; antibiotics or further treatment may be necessary.
- **Fever:** Mild fever (up to 37.8°C) is common after anesthesia. Maintain deep breathing and coughing to prevent lung congestion. Reach out if fever persists or worsens.
- **Wound issues:** Signs of wound breaking down, necrosis, or unexpected wound opening should be reported immediately, as these may require additional treatment.
- **If your wound issues are significant and necrosis from your lumpectomy or reduction is present and compromising skin or nipple viability.** A referral to HBOT(hyperbaric oxygen therapy) will be made and this may require a visit to their clinic once a day for a few weeks.

Scar & Skin Care

- **Scar healing:**
 - Scars initially appear red and thick but typically soften and fade over 9-12 months.
 - After your dressings are removed, a silicone scar gel or sheets can be used to improve scar appearance.
- **Sun exposure & tanning:**
 - Avoid sun over scars for at least four months to prevent permanent hyperpigmentation.



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- Use high-SPF sunscreen if exposure is unavoidable.

Mobility & Activity

- You are encouraged to get up and walk early to promote circulation and reduce blood clots, starting the day of surgery.
- Prolonged bed rest is discouraged due to risk of deep vein thrombosis (DVT) and pulmonary embolism.
- Avoid heavy lifting, vigorous exercise, and raising your arms above shoulder level on the operated side for **at least 4 weeks**.
- **Sleeping position:**
Sleep on your back or unaffected side.
- **Physical activity:**
Gentle walking and light activities can be resumed early, but avoid strenuous or high-impact exercise until cleared, typically after 4 weeks.

Contralateral Breast & Additional Procedures

- If you had a contralateral reduction or liposuction contouring:
- Please monitor for **persistent swelling, unusual firmness, or changes in shape or size** of the contralateral breast.
- Some asymmetry or swelling is normal initially; however, notify your surgeon if you notice significant or worsening differences.
- Be alert for signs of infection, redness, or warmth on the contralateral side, and report any concerning symptoms immediately.
- Your surgeon will follow the healing process during routine check-ups and advise on any further procedures if needed to maintain symmetry.

Follow-Up & Long-Term Care

- Attend all scheduled follow-up appointments for wound healing, oncologic surveillance, and aesthetic assessment.
- Continue to monitor for any changes in breast shape, sensation, or signs of complications.



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When to Call the Office

Please contact us immediately if you experience any of the following:

- Increased swelling, pain, or change in color or appearance of the reconstructed breast(s)
- Sudden or worsening swelling of the chest
- Redness that extends beyond the incision sites
- Severe pain that is not relieved by prescribed medications
- Fever over 38°C (100.4°F) or 101°F
- Any signs of infection, significant wound drainage, or unusual symptoms
- Persistent or worsening numbness or tingling

For urgent concerns after hours or on weekends, please proceed directly to NYGH Emergency. We advise against visiting other emergency departments unless necessary, as care there may be against our recommendations and could delay your recovery.