



# Mastectomy Care Program

**HONORHEALTH®**

**Virginia G. Piper Cancer Care Network**



## Virginia G. Piper Cancer Care Network

# WELCOME

 to the Virginia G. Piper Cancer Care Network.

Thank you for choosing us as a partner in your care. We understand this can be a very stressful time for you and your family. Our goal is to provide you with the most professional and courteous service possible.

Getting a cancer diagnosis can immediately pause everything in your life – work, family commitments, long-term plans. While our focus is laser-sharp on treating your disease so you can recover as quickly as possible, it can be easy to forget a very important part of the equation:

You.

When you get a diagnosis, it's common to be overwhelmed with advice and stories from well-meaning friends and family, however, sometimes you need an expert who's on your side.

That's where the support services of the HonorHealth Virginia G. Piper Cancer Care Network come in. A team of navigators, social workers, exercise physiologists, nutritionists and librarians, as well as Mind, Body and Spirit support groups and classes are designed especially to help you and your caregivers.

The enclosed information walks you through what to expect before, during and after your surgery. Of course, your care team will be with you every step of the way to answer any questions and help you feel prepared.

Thank you for the opportunity to serve you.

Sincerely,

Virginia G. Piper Cancer Care Network.

# IN PREPARATION FOR SURGERY

It is important to be aware of several practices that can benefit your health. These include eating healthy foods, quitting smoking, controlling your blood sugar and being informed about your current medications and any additional medications you may take after surgery. **Better health before surgery increases your ability to heal and recover after surgery with fewer problems.**

*If you have any specific questions or concerns, please speak to your surgeon before your surgery.*

## BEING HEALTHY

### Eating Healthy Foods

Good nutrition is important before surgery. It is also important to optimize healing after surgery. Your surgeon may want you to see a dietitian, who can help you work out an eating plan before and after surgery. Notify your surgeon if you have trouble eating and have a decreased appetite or unexplained weight loss. If you drink alcoholic beverages, you should not drink anything with alcohol for at least 24 hours before your surgery. Because alcohol can interfere with medications for pain, avoid alcohol after surgery until you consult with your doctor.

*Obesity can increase your risk of complications.*

### Smoking Cessation

Smoking decreases the ability of your bones and tissues to heal and puts you at increased risk for complications related to anesthesia, such as pneumonia. Your risk for infection also increases. If you smoke, quit before surgery. Ideally, this should occur at least 90 days before your surgery. Ask your surgeon or nurse about available resources to help you quit smoking or for nicotine substitutes to help with nicotine cravings after surgery.

### Diabetes and Blood Sugar Control

Blood sugar control is important for healing. While in the hospital, the surgeon may order blood sugar tests before your meals and at bedtime. This may

occur even if you do not check your blood sugar regularly at home. You also may be given insulin while in the hospital even if you do not use insulin at home. Usually, this is only temporary; normally, you will resume your previous medications after you leave the hospital.

*Your surgeon may prescribe a specific diabetic diet for you to eat while in the hospital to help control your blood sugar levels. We encourage you to follow the prescribed diet.*

### Medications

Your surgeon and nurses need to know what prescribed and over-the-counter medications, supplements and herbal remedies you are taking. Some of these can increase your risk of bleeding or other complications after surgery.

Your surgeon or a surgery pre-assessment nurse will tell you which ones to stop taking and when to stop taking them before surgery. They also will tell you which medications you should continue taking. If you have any questions about your medications, please contact your surgeon before your surgery.

**Your surgeon may have you avoid all nonsteroidal anti-inflammatory medications (NSAIDs), such as Advil, Motrin, Ibuprofen, Aleve, naproxen, Celebrex, etc., to decrease your risk of excessive bleeding.**

# PLAN BEFORE

If you have other medical conditions, such as diabetes, high blood pressure, heart or lung disease, your primary care physician and/or specialists need to agree that you can have surgery. To do so, they may recommend an EKG, chest X-ray, and blood and urine tests ahead of time. These results should be faxed to your surgeon's office before your surgery.

- Speak to a surgery pre-assessment nurse from the hospital. A nurse will call you before your surgery to discuss your surgery. The nurse will assess your health status and review specific instructions to follow in preparation for surgery.
- If you have advance directives, such as a Living Will or Medical Power of Attorney, please make copies to bring with you on the day of surgery.
- Notify your surgeon immediately if you develop any signs of illness before surgery. This includes a cold, cough, fever, rash, infection, urinary tract infection or any change in your health.

- Plan to pack a small bag of your personal belongings, such as a toothbrush, toothpaste and other grooming items. Include loose-fitting clothing, such as a warm-up suit and a good pair of shoes with rubber soles to wear home when you are discharged from the hospital.
- Make arrangements for a ride home from the hospital. Follow your surgeon's recommendations on when you can start driving.
- Along with driving activities, it would be beneficial to have a caregiver or friend who can help with your general care. Examples of help include meal preparation, taking out the trash, housework, yard work, grocery shopping and trips to pick up needed medications.

*Make a list that keeps personal belongings to a minimum to prevent them from being lost or misplaced.*

---

## NIGHT BEFORE SURGERY

### **Do not eat, drink or smoke after midnight.**

This includes water, coffee, juice, chewing gum or mints. *It is unsafe to have any anesthesia if you have eaten too closely to your scheduled surgery time.*

**Brush your teeth.** It is recommended that you also use an antiseptic mouthwash. *Antiseptic mouthwash will help reduce bacteria that can cause respiratory infections after surgery.*

**Do not shave** the area or around the area where you will have surgery two days prior to surgery. *Shaving skin creates small cuts in the skin that can cause infections.*

**Do not apply** any deodorant, powder, perfume aftershave, body lotions, creams or makeup. *These promote bacteria growth that can cause infections.*

---

## MORNING OF SURGERY

**Take only approved medications** with a small sip of water. Follow the instructions of your pre-assessment nurse and surgeon on what medications to take the morning of surgery.

**Leave all valuables**, including your wallet, purse, jewelry and rings at home. Bring a small bag of your personal belongings such as a toothbrush, toothpaste and other grooming items.

**If you wear** eyeglasses, hearing aids or dentures bring them or wear them on the day of surgery.

**Your family may wait in your room** or in the surgical waiting area while you are in surgery. The surgeon will meet with your family in the waiting area immediately after your surgery.

**For the most up-to-date information on our current visitor restrictions, please talk to your surgeon or visit [HonorHealth.com](http://HonorHealth.com).**

# DAY OF SURGERY

**Pre-op** Once you are finished with hospital registration, you will be escorted to the surgery area where a nurse will prepare you for surgery. Preparing you for surgery includes having your vital signs checked, an IV inserted into your arm and medications given to you, if necessary. You also will be asked several questions about your health and medical history. You will speak to your surgeon and anesthesiologist and be asked to sign a surgical consent/permit before going into the operating room.

**Surgery** The length of your surgery will vary, depending on the type of surgery, location of surgery, your surgeon, and your overall health and size before surgery. Specialized equipment and padding will be used on you while you are positioned and repositioned by the surgical team before and during your surgery. *At your family members' request, an operating room (OR) nurse will come out of the operating room every two hours and provide them with updates about you and your surgery. \*\*\**

**Post Anesthesia Care Unit (PACU)** After surgery, you will be taken to the Post Anesthesia Care Unit (PACU), where you will remain for approximately one to two hours before being transferred to your room. While in the PACU, you will be closely monitored as the anesthesia wears off. Nurses will monitor your blood pressure, pulse and breathing; manage your pain; monitor your IV, urine output and dressings; and encourage you to take deep breaths, cough, and move your feet and ankles. When you are ready to leave the PACU, you will be taken to your room.

**Family Waiting Area** *When you are taken into the operating room, your family will be asked to wait in the surgical waiting areas. Many waiting areas are staffed by volunteers. If your family members plan to leave the waiting area or hospital, they should notify the volunteer or a pre-op nurse and provide contact information. \*\*\**

**\*\*\* For the most up-to-date information on our current visitor restrictions, please talk to your surgeon or visit [HonorHealth.com](http://HonorHealth.com).**



*It is important that family members stay in the waiting room so that they have an opportunity to speak with the surgeon after surgery. For the most up-to-date information on our current visitor restrictions, please talk to your surgeon or visit [HonorHealth.com](http://HonorHealth.com).*

HonorHealth has a wireless network service for visitors that provides Internet access for personal wireless devices, such as cell phones, laptop computers and tablets. This wireless service is accessible throughout the hospital: main lobby, cafeteria, waiting areas and patient rooms. Refreshments are available in the coffee shop, in the cafeteria and vending machines in some waiting areas.

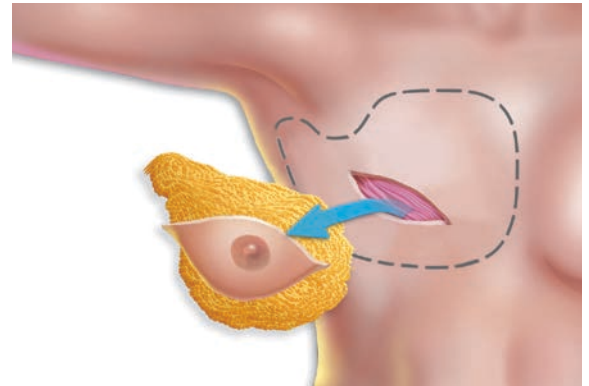
**Before you come in for surgery, a nurse from the HonorHealth pre-assessment area will call you to review your medical and surgical history, along with your current prescribed and over-the-counter medications. Having a list of all medications you take, including over-the-counter and herbal supplements, will be helpful.**



# YOUR SURGERY

**Mastectomy** is the surgical removal of the breast. Different types of mastectomy surgeries include: simple, modified, radical, skin and nipple sparing. At this point, you and your surgeon will have discussed your options and the type of procedure(s) that you will be having.

During your surgery, your breast tissue will be removed. This tissue extends from your collar bone down to the edge of your ribs, and from your breast bone (sternum) to under your armpit (axilla).



**Lymph Nodes** are located throughout your body and act as filters for your lymphatic system. In your breasts, the lymphatic ducts come together in the axilla, where they filter foreign particles, including cancer cells. In many cases your surgeon will check your lymph node(s) and may remove some for testing. The lymph node(s) are examined by a pathologist to see if your cancer has spread. This can be done by performing either a Sentinel Node Biopsy or an Axillary Lymph Node Dissection. When checking the lymph nodes, you may have a second incision in your armpit.

**Sentinel Node Biopsy** The sentinel or “guardian” lymph node is the first lymph node that the lymphatic fluid drains through. In order for your surgeon to locate this node, a blue dye and/or a small amount of radioactive material will be used to help identify which node(s) will be taken out and inspected under

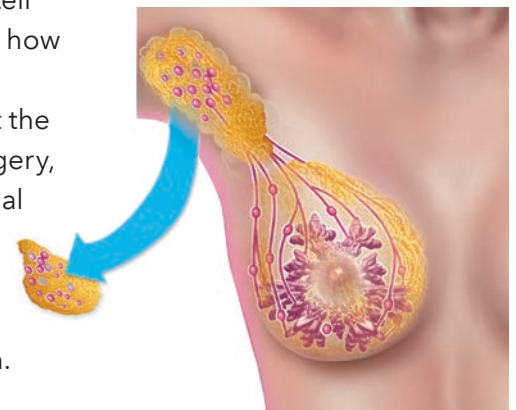
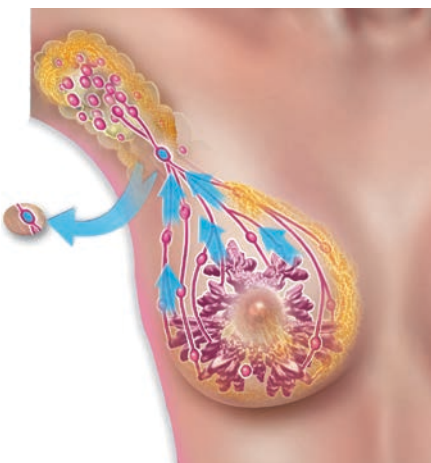
a microscope. This is reviewed by a pathologist and often takes several days to get results. Sometimes, the lymph nodes are examined at the time of surgery. You should clarify with your surgeon. If cancer cells are

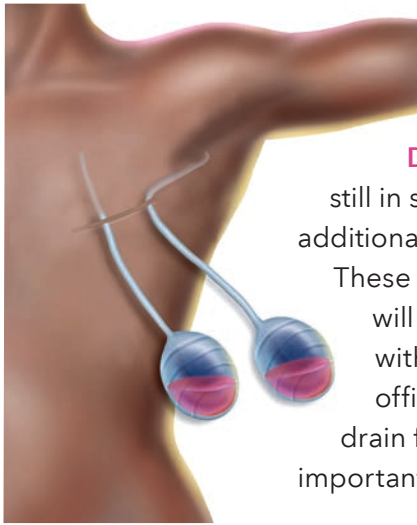
**If blue dye is injected during the biopsy your urine or stool may be discolored for a couple of days. Do not be alarmed.**

seen by the pathologist, then your surgeon may perform an Axillary Lymph Node Dissection.

**Axillary Lymph Node Dissection** If you have been diagnosed with having cancer in your lymph nodes from a previous biopsy, or if your sentinel lymph node is “positive” for cancer, then your surgeon may elect to take out the lymph nodes in your armpit. This can vary case-by-case and your surgeon will talk with you about whether you need this procedure.

Because lymph nodes tend to bunch together (similar to a bunch of grapes), your surgeon will not be able to tell you exactly how many were removed at the time of surgery, but your final pathology report will have that information.





## YOUR SURGERY

**Drains** are placed after all of your procedures are complete, while you are still in surgery. You will have one drain from each operated breast and may have an additional one after an Axillary Lymph Node Dissection.

These drains are placed to help remove fluid from your surgical area. Your nurses will explain how to take care of these drains, because you will be going home with them. These drains will be removed by your surgeon during a follow-up office visit. They normally are removed 10 - 14 days after surgery or when they drain fewer than 30 milliliters in a 24-hour period for two days in a row. It is important to measure drainage and to note it, so you can share it with your surgeon.

---

## WHAT TO EXPECT AFTER SURGERY

When you arrive to your room, staff will check on you frequently to measure your vital signs, inspect your dressing and drains, and check on your general well-being. You will have an **IV catheter** in your arm or hand, and you will receive medications and fluids. The most common medications given through your IV are antibiotics and pain medications.

*Medications that you take on a regular basis at home will be reviewed by your surgeon and may or may not be continued after surgery.*



*All rooms at HonorHealth are private.*

**Pain Management** After surgery you will have pain and discomfort. Controlling your pain after surgery is important to you and your care team. Your nurse and

surgeon will discuss your pain management plan with you. Your nurse and care team will make every attempt to keep your pain at an acceptable level.

**If you have any concerns about your medications, please tell your nurse and surgeon.**

You set your pain goal that allows you to rest comfortably but also allows you to effectively participate in physical activities, such as positioning yourself in bed and walking. You will be asked to rate your pain on a scale on which "0" means no pain and "10" means severe pain.

Many different pain medications are available to you. Some are pills, while others may be given intravenously (IV).



# WHAT TO EXPECT AFTER SURGERY

**Whiteboard** You will have a whiteboard in your room. This board has the names of your care team along with the plan of care and goals that both you and your care team have discussed. It is important that your questions or concerns are on the board so that they can be addressed.

The board will be updated frequently to ensure we are communicating effectively and addressing your needs.

It is important to keep the medication component of your whiteboard updated. Notify your nurse of any unwanted side effects so that special attention can be paid to your medications. The whiteboard also will display the time when pain medication was last given to you and the time your next dose is available.

**Walking and Physical Activity** We encourage you to walk as directed by your surgeon as soon as possible after surgery. Walking early improves recovery and helps prevent common postsurgical problems, such as constipation or blood clots.

Please ask for assistance any time you want to get out of bed, walk or need to use the bathroom. This is for your safety, to prevent you from falling. You will have sequential compression devices on your legs after surgery and these can be a hazard, causing falls if not disconnected properly. Please ask for staff assistance before getting out of bed.

**Sequential Compression Device (SCD)** is a device placed on your legs that will inflate with air to squeeze/massage your legs to help promote circulation and prevent blood clots.

**Incentive Spirometer** After surgery, your risk for pneumonia increases because of the medications you received.

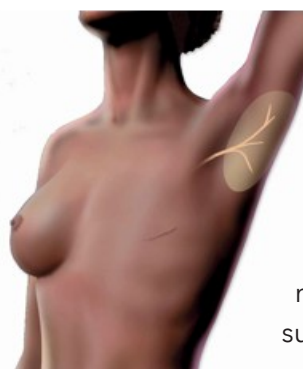
Your surgeon may order an incentive spirometer, which is a device that will help you breathe deeply and expand your lungs after surgery. If ordered, your nurse or respiratory therapist will show you how to use it. You should use it at least 10 times every hour when awake.

**Your nurse and surgeon will speak with you about your progress to determine when you are ready to go home. We want to make sure that you are able to eat, use the bathroom, walk safely and that your pain is controlled. Before going home, you will receive written discharge instructions from your nurse and surgeon about your medications, care when you are at home and when to follow up with your surgeon.**

**Diet** Your diet usually will start with ice chips, then slowly transition to liquids, then to regular food. It is best to start with sips of clear liquids until you are sure that you are not having any nausea. Also, introducing food slowly will help your stomach tolerate solid foods and aid in digestion and your bowel function. As long as you are not having nausea, you can eat a regular diet.

**Constipation** Even if you have regular bowel movements before surgery, you are likely to experience constipation after your surgery. This is caused by the anesthetic and pain medicine you will receive, changes in your diet and reduced physical activity.

While you are in the hospital, it is important that you walk, drink plenty of fluids and take stool softeners or laxatives. This also will be important to continue when you go home after surgery. Your nurse, surgeon and other health care team members will discuss this with you in more detail.

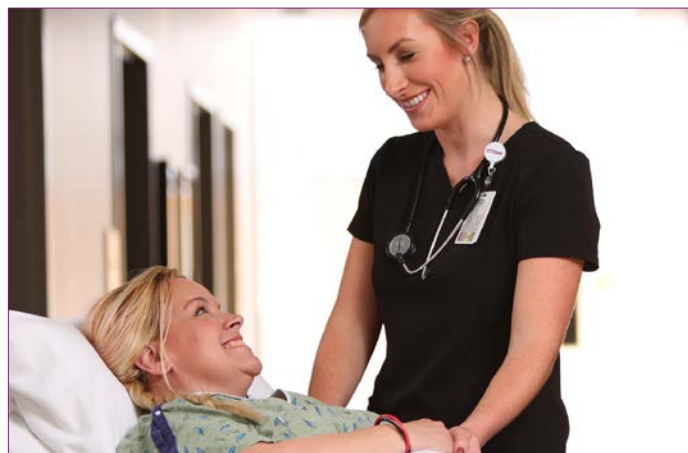


**Numbness** You may have numbness in your upper inner arm and/or armpit, because of injury to your nerves. This numbness usually improves over time, but it may never return to the way it was before surgery.

**Surgical Site and Bathing** Surgical dressings will be changed according to your surgeon's instructions. It is normal for the surgical site to have swelling, bruising or a small amount of drainage. Your surgeon also will indicate when you can shower. When showering, do not scrub your incision site. You will not be allowed to take a bath, use a hot tub or spa, or go swimming until your surgeon tells you it is OK.

**Lymphedema** If you have damage or removal of your lymph nodes, then you are at an increased risk for developing lymphedema. This is caused when lymph fluid is not draining well, which can cause a build up and swelling in your arm and/or hand. Lymphedema can occur at any time after surgery, even years later.

If you notice swelling in your arm or hands or feel that your jewelry is fitting a bit tightly, these may be signs of lymphedema and you should let your surgeon know.



## RECOVERING AT HOME

Taking the **time to heal** is important. You may feel tired and lack energy, which is completely normal after having anesthesia, surgery and pain medications. You may find that simple tasks, such as pushing yourself up in bed, getting out of a chair or even brushing your hair are difficult.

**It is important to talk with your surgeon about exercising.**

It is common to have muscle weakness, tightness and soreness not only in your chest but in your arms and shoulders. Even though it may be difficult, we recommend that, unless

your surgeon says otherwise, you use your arm as much as you can tolerate, as soon after surgery as possible. This will help you regain your full range of motion. Active stretching, heavy lifting or strenuous exercise should only be started after getting your doctor's approval.

### *At home reminders*

**Ambulate** - *Get up and walk as much as possible.*

**Incentive spirometer** - *Continue to use this at home.*

**Showering and washing** - *Talk with your surgeon to find out when you can shower.*

**Pain control** - *Don't get behind on controlling your pain.*

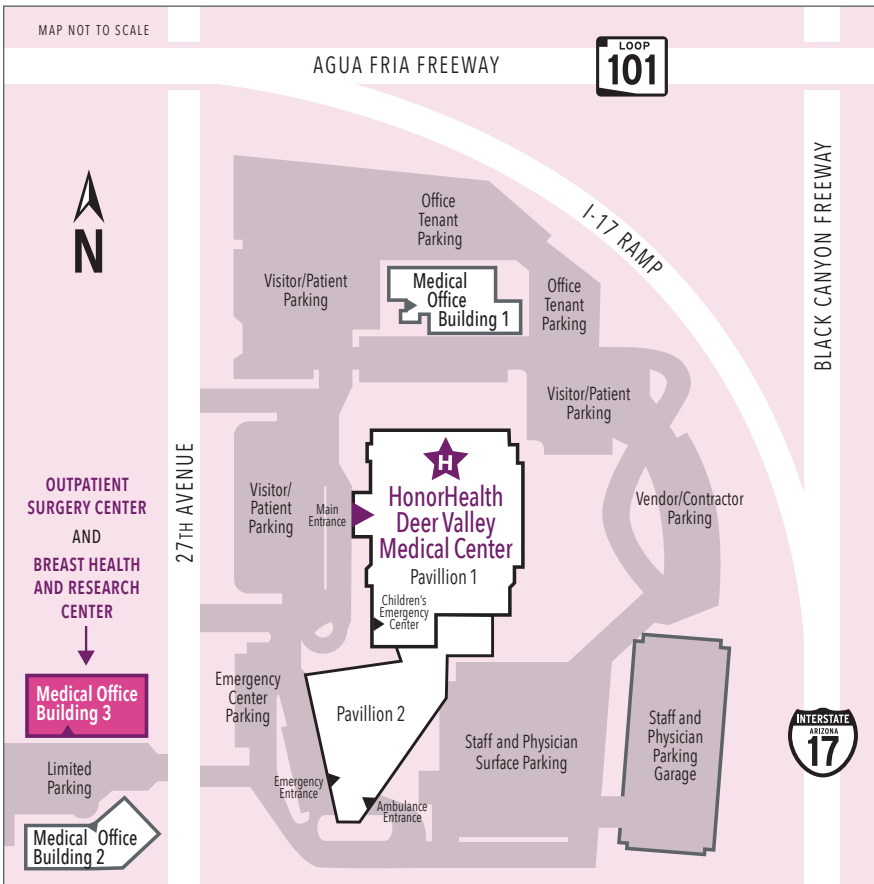
**Arm precautions** - *Be gentle on your arm if you have had a Sentinel Node Biopsy or axillary dissection.*

**Follow-up appointment** - *Make sure you have a follow-up appointment with your surgeon.*

**Hydration** - *Keeping yourself hydrated and drinking enough water will prevent constipation and reduces dizziness.*

## WHEN TO CALL THE DOCTOR

- Fever greater than 101° F
- Shaking/Chills
- Spreading redness from around your incision or drains
- Excessive drainage from your incision
- Lightheadedness
- Chest pain or shortness of breath
- Nausea or vomiting that persists for more than 24 hours (sooner if you have diabetes)



# DIRECTORY

## New Patient Referral Line

1-855-485-4673-(HOPE)

## HonorHealth Deer Valley Medical Center

19646 N. 27th Ave., Suite 205  
Phoenix, AZ 85027

Main Number . . . . . 623-879-6100

Medical Records . . . . . 623-879-5571

Surgery. . . . . 623-879-5840

## Breast Health and Research Center

Main Number . . . . . 623-780-4673

## HonorHealth Scottsdale Shea Medical Center

10460 N. 92nd St., Scottsdale, AZ, 85260

Main Hospital . . . . . 480-323-3000

Piper Surgery Center 480-323-3950

## Virginia G. Piper Cancer Center

Main Number . . . . . 480-323-1250

[HonorHealth.com/cancer](http://HonorHealth.com/cancer)



The contents of the Mastectomy Care Program, such as text, graphics, images, and other material contained in this book ("Content") are for informational purposes only. The Content is not intended to be a substitute for professional medical advice, diagnosis, or treatment. Always seek the advice of your physician or other qualified health provider with any questions you may have regarding a medical condition. Never disregard professional medical advice or delay in seeking it because of something you have read in this book! If you think you may have a medical emergency, call your doctor or 911 immediately. HonorHealth does not recommend or endorse any specific tests, physicians, products, procedures, opinions, or other information that may be mentioned in the pamphlet. Reliance on any information provided by HonorHealth is solely at your own risk.



**Virginia G. Piper Cancer Care Network**