

Breast Surgery Discharge Information

If you need this leaflet in a different language or accessible format please speak to a member of staff who can arrange it for you.

اگر به این بروشور به زبان دیگر یا در قالب دسترس پذیر نیاز دارید، لطفاً با یکی از کارکنان صحبت کنید تا آن را برای شما تهیه کند.

Jeśli niniejsza ulotka ma być dostępna w innym języku lub formacie, proszę skontaktować się z członkiem personelu, który ją dla Państwa przygotuje.

Dacă aveți nevoie de această broșură într-o altă limbă sau într-un format accesibil, vă rog să discutați cu un membru al personalului să se ocupe de acest lucru pentru dumneavoastră

如果您需要本传单的其他语言版本或无障碍格式，请联系工作人员为您安排。

إذا احتجت إلى هذه النشرة بلغة أخرى، أو بتنسيق يسهل الوصول إليه، يرجى التحدث إلى أحد الموظفين لترتيب ذلك لك.

Post Op Information

Please tick all boxes that apply:

Discharged from:

Ward 4B

Sanderson Suite

AFFIX PATIENT STICKER

What should I expect?

General Anaesthetic

You will probably feel very tired and low on energy immediately after your operation, this is completely normal. This is due to the anaesthetic drugs used. Some people may also feel dizzy or sickly. These feelings will begin to improve over the next few hours but it may take a day or two until your energy levels start returning to normal.

You may notice discomfort in your throat or an awkward sensation when you swallow. This is from the tube placed in your airway to help you breathe whilst you were asleep under the anaesthetic. This will improve over the next few days.

Local Anaesthetic and Analgesia

Most people are given a local anaesthetic during the operation to help control pain after the operation. This usually lasts 6 to 8 hours before it begins to wear off. At this time you may notice more discomfort around your wound and the operation site (your breast and / or armpit). We will provide you with some tablet painkillers to help with any discomfort. It is a good idea to take these at regular intervals for the first couple of days and then you can begin to take them as and when you need them, as your discomfort improves. Some painkillers (particularly codeine) can cause constipation.

Blue Dye

We injected some blue dye into your breast to help us identify the lymph nodes in your armpit. This blue dye will give you a pale grey appearance in the first 24 hours after the operation.

You may also notice your urine is a bright green colour for the first day or two as the dye leaves your body. The patch of skin on your breast where the dye was injected is stained blue by the dye. It will fade over time but may take up to six months before it goes completely.



Skin glue

We have used a skin glue to help seal your wound. This is waterproof and means that you can have a shower or bath as soon as you feel able too. When drying make sure you only pat the wound dry gently with a towel. There are dissolvable sutures below the glue for extra strength. Your body will break these down over time and they do not need to be removed.



Paper sutures and dressings

We have closed your wound with a dissolvable suture. We sometimes leave the knot on the outside to be trimmed when we see you in clinic. Your body will breakdown the rest of the suture over time.

To provide extra support and protection for the wound we have also used paper sutures. There will be a water resistant dressing over the top of these. This dressing is only water resistant and therefore we advise you not to shower for the first couple of days after your operation whilst the skin begins to heal. After this you are able to shower with care, avoiding the dressing (removing the shower head may help with this) or take a shallow bath. You may notice the dressing begins to lift away. We will provide you with a couple of spare dressings so that you can replace them at home if needed. Please make sure you leave the paper sutures in place until we have had chance to review your wound as they help prevent wound infections and improve the final appearance of your scar.



Pressure dressings

Occasionally we apply an additional dressing over the operation site (your breast and / or armpit) to help apply some extra pressure. This is just an extra precaution to help keep the shape of your breast and reduce the chance of fluid building up in the wound. We will let you know when your pressure dressing can be taken off; it is usually within a couple of days after the operation.



Drains

We sometimes leave one or two drains in place after the operation to help prevent a build-up of fluid. They will need to stay in place for a couple of days or a couple of weeks depending on the type of surgery you had. They are sutured in place so they will not fall out but make sure you avoid accidentally pulling on them. You can carry them around with you in a bag until they are ready to be taken out. We will give you instructions on how to look after them and when they are likely to be taken out before you leave the hospital.



Wear supportive clothing

As soon as you arrive on the ward you should be helped into a good supportive bra. We recommend a non-underwired bra. Some people use a special post-operative bra but a good sports bra is as effective. If you are having a mastectomy without a reconstruction your breast care nurse will have provided you with a special bra with a soft prosthetic insert to wear.

What should I expect?

You should keep this type of bra on night and day for at least two weeks. It helps support your breast shape as it heals and the pressures helps to prevent a build-up of fluid at the operation site (your breast and / or armpit).

Keep mobile

We suggest you get back on your feet and move around the house as soon as you feel able to. Lying in bed or sitting on the sofa for long periods of time can increase your risk of developing blood clots (DVT or PE). You may have been given a set of exercises by your breast care nurse, carry these out as directed.

Although it is good to get moving after your operation do not be tempted to overdo things. Avoid strenuous activity like exercising for the first few weeks and try to avoid situations where you need to reach above your head. For some people this will affect when they can return to work if they have an active job.

Driving

Everyone will be ready to return to driving at different times after their operation. Generally speaking it takes two to three weeks. Before you get back behind the steering wheel it is important to know you are safe to drive. You should be able to do the following without any discomfort;

- wear your seatbelt firmly
- look over your shoulders into your blind spots
- reach for the gearstick and handbrake
- perform an emergency stop without hesitation (pain will cause a subconscious hesitation).

It is a good idea to contact your insurance provider before you re-start driving. Make sure you are covered on your policy by informing them you have had an operation.

What should I look out for?

Bruising

A small amount of bruising around wounds is normal. If the swelling around the wound or your breast is widespread and sore it may suggest a blood clot has built up in the wound. This is called a haematoma. A small haematoma is likely to settle down on its own. A larger haematoma may need to be drained so if you are concerned by bruising or discomfort please contact us on the numbers provided at the end of this leaflet for further advice.

Swelling

Swelling around the wound, armpit or breast may be due to a build of up of fluid, called a seroma.

This may settle down without any further treatment but larger collections of fluid will need to be drained. Wearing a supportive bra without any underwire will help reduce the risk of fluid collecting. If you are concerned by the presence of swelling please contact us on the numbers below so we can advise you further.

What should I look out for

If you have had a biopsy of the lymph nodes in your armpit or had the lymph nodes cleared from your armpit you may notice swelling in your arm on the same side. This may be due to a condition called lymphoedema. Please contact us on the numbers below so that we can assess this further.

Redness

Redness around your wound is normal in the first day or two but this should be improving day by day. Keep a close eye on any red areas you notice. If they are getting worse or you also have swelling or soreness it might be a sign of infection. Please contact us on the phone numbers below so that we can arrange to assess this further.

Leg pain

After an operation people are at a slightly higher risk of blood clots in the leg known as a deep vein thrombosis (DVT) or on the lungs, known as a pulmonary embolus (PE). This is why we advise you to avoid crossing your legs, keep your feet moving when resting and to move around the house at regular intervals whilst you recover.

Pain in the calf or upper leg experienced as a constant dull ache, a new heaviness in one leg or swelling of the leg can all be signs of a DVT. If any of these symptoms are troubling you then please seek medical attention to ensure there is no underlying DVT.

Shortness of Breath

It is natural to be a little short of breath when trying to move about in the first couple of days after an operation as your strength builds back up. If this breathlessness is worsening or so bad that it prevents you from moving about then please seek medical attention. New or worsening breathlessness can be a sign of a chest infection or a blood clot on the lungs, a PE. It is important to make sure these are not causing your shortness of breath and start the right treatment if they are.

What happens next?

The tissue removed during surgery is sent to the laboratory where it is assessed under the microscope. This provides us with more information on your condition and confirms we have removed all the tissue that we were planning to. When these results, your 'histology' results, are available we will discuss them in our multi-disciplinary team (MDT) meeting. Everyone involved in your care (nurses, radiologists, pathologists, oncologists and surgeons) will all be present to discuss the best individual management plan for you. The outcome of this will be communicated to you either in a clinic appointment or by telephone.

Holistic Needs Assessment

If you underwent surgery for breast cancer or DCIS then your breast care specialist nurse may want to have a meeting with you once you have completed all of your treatment. This is to discuss any ongoing support you may need and how we will monitor you over the next few years.

More information will be given to you nearer the time.

Who can I contact?

General Queries

For general queries regarding lost property or events surrounding your discharge please contact the ward directly.

Ward 4B

Whiston Hospital, Warrington Road, Prescot, Merseyside, L35 5DR

Tel. 01514 4301637

Sanderson Suite

St. Helens Hospital, Marshalls Cross Road, St. Helens, WA9 3DA

Tel. 01744 646069

Dressings Clinic/ Drain Review Queries

Nenita Prile Burney Breast Unit

St. Helens Hospital, Marshalls Cross Road, St. Helens, WA9 3DA

Tel. 01744 646036

Breast Care Specialist Nurse

If you would like to discuss anything in more detail or you have any questions about further treatment following your histology results then you can reach your breast care nurse on the number below. Please leave an answer phone message and they will call you as soon as they can.

Tel. 01744 646053

When is my follow-up appointment?

The following appointments have been made for you on the Burney Breast Unit at St. Helens Hospital, Marshalls Cross Road, St. Helens, WA9 3DA.

Dressing Clinic on/...../..... at

This appointment is to review your wound and dressings and ensure everything is healing as we would expect it too.

If you have been given drains then these will also be reviewed in this appointment and may even be removed at this time.

Results Clinic on/...../..... at

We will meet in clinic at the above time to discuss your histology results and the treatment options recommended for you.

If these results are ready earlier we may contact you to see you in clinic sooner.

This does not reflect whether it is good or bad news only that we realise this is a very stressful time for you and we do not like to keep you waiting longer than necessary.

Sometimes not all the information is available to us in clinic and we may have to make a further appointment with you to discuss the information we are still waiting for.

Whiston Hospital
Warrington Road,
Prescot, Merseyside, L35 5DR
Telephone: 0151 426 1600

St Helens Hospital
Marshall Cross Road,
St Helens, Merseyside, WA9 3DA
Telephone: 01744 26633