

# ANDREA MARTIN, MD

CERTIFIED BY THE AMERICAN BOARD OF PLASTIC SURGERY

## DISCHARGE INSTRUCTIONS BREAST REDUCTION AND BREAST LIFT (MASTOPEXY)

### MEDICATIONS

- You may be prescribed narcotic pain medication, which you should take as directed and as needed for pain. Do not exceed the prescribed amount, unless instructed by your surgeon.
- Wean yourself off narcotic medication as soon as you are able.
- Take over-the-counter Tylenol (acetaminophen) on a scheduled basis (Ex.: 650mg every 4 hours, or 1000mg every 6 hours) starting on your day of surgery. *If you have liver problems, do not take acetaminophen, unless you have discussed this with your doctor.*
  - DO NOT TAKE MORE THAN 4000 mg of acetaminophen per a day.
- Your narcotic medication may also contain acetaminophen, so you need to be aware of your total dose from all medications you are using.
  
- Ibuprofen (ie. Advil, Motrin) or naproxen (Aleve) may be started the same day as your surgery and may be used together with your narcotic pain medications and/or with acetaminophen. *However, do not use ibuprofen or naproxen if you have had problems with stomach ulcers, kidney problems or if you have been told by a doctor not to use nonsteroidal anti-inflammatory drugs (NSAIDs).*
- Wean yourself off acetaminophen and/or ibuprofen/naproxen as soon as you are able.
  
- Purchase an over-the-counter stool softener (Metamucil, Colace) while taking narcotic pain medication. This helps avoid constipation.
- You may resume taking your routine medications, unless your surgeon instructs you differently.
- Do not take any supplements, blood thinners or aspirin for 1 week after surgery unless instructed otherwise by your surgeon.

### DIET

- You should gradually resume your normal diet.
- Drink plenty of fluids/ water (eight 8-ounce glasses a day).
- Do NOT drink alcohol for 24 to 48 hours after surgery, or while taking narcotics.

### BRA & CLOTHING INSTRUCTIONS

- If given a surgical bra, leave the bra in place.
- You may shower 48 hours after surgery. You may remove the bra to shower. Replace the bra after showering.
- Wear a gently compressive and supportive front-closing bra for 4 weeks, or as instructed by your surgeon.
- **Do NOT wear an underwire bra for 4 weeks after surgery.**
- Do not to lift arms over head to put on shirts for the two weeks, or as instructed by your surgeon. Front closing shirts (such as button downs, or zip ups) are recommended.

## ACTIVITY

- **SHOWER:** You may shower 48 hours after surgery. When showering, remove the bra (and foam or foam tape, if used) but leave the remaining dressings in place.
- **After showering, gently pat your breasts dry, and let them air dry before replacing the bra.** Do not scrub your breasts or the incisions. Minor blood oozing from the incisions is normal.
- If you have paper tape or Steri-Strips over the incisions, do **NOT** remove them. You may still shower with them in place.
- **Do NOT soak, take a tub bath, swim, or whirlpool for 4 weeks, or if there are any openings in the incision.**
- **SLEEPING:** For the first 2 to 3 days after surgery, sleep with your head and shoulders elevated as much as possible to help reduce swelling and discomfort. A recliner is a good place to sleep and rest. Use multiple pillows in bed to keep your head and chest elevated.
- Avoid sleeping on your sides for 2 weeks and on your abdomen for 4 weeks, or as instructed by your surgeon.
- For the first few times, you may need assistance getting into and out of the bed/chair. Do not push/pull yourself up.
- You are encouraged to **begin walking the day of surgery.** While sitting, alternate flexing and pointing toes several times each hour to help with circulation.
- **IMPORTANT: To decrease the risk of blood clots after surgery, you should walk regularly, and flex your calf muscles. Except during your normal sleeping time, get up and walk around for at least 5 minutes every hour.**
- **DRIVING:** You may begin driving 5 to 7 days after surgery; longer if you do not feel comfortable with your reflexes.

### **Do NOT drive while taking narcotic medications.**

- **CAUTION:** Do **NOT** do activities that bring your arms above your head for 2-4 weeks, as instructed by your surgeon (examples: lifting items to shelves or bringing arms above head to put on shirts).
- Do **NOT** push, pull, or lift anything heavier than 10 pounds (about the weight of a gallon of milk) for 4 weeks.
- Do **NOT** do any strenuous activity or exercise/ activities (running, weightlifting, aerobics, vacuuming) for 2 weeks. After you start exercising, go slowly over 1 to 2 weeks until you are comfortable with more strenuous exercises.
- Do **NOT** engage in any sexual activity for 2 weeks; resume when completely comfortable.
- Do **NOT** drive or handle heavy machinery while taking narcotic pain medication or muscle relaxant medications.
- Do **NOT** travel in a cramped space (car or plane) for 10 days, if possible.

## WHAT ELSE TO EXPECT

- Some pain and discomfort for 3 to 4 weeks, although it should gradually get better after the first 2 to 3 days.
- You may notice a small amount of drainage from the incision sites on the first one 1 to 2 days. This is normal. You may cover with gauze and secure with paper tape.
- If there are any non-absorbable sutures, they will be removed 1 to 2 weeks after surgery.
- Do not be concerned if you notice decreased sensation in your breast/nipples. It is important to remember that breast/nipple sensation can take up to 1 year, possibly 2, to completely return.
- Surgical incisions are usually thin at first, become thick and red/pink for up to 6 months, and then begin to fade. It takes 12-18 months for a scar to fully mature.

## **SCAR MANAGEMENT**

- Please refer to the Incision and Scar Care Instructions document.

## **ADDITIONAL INSTRUCTIONS**

- Look at your incisions once a day to note any signs of infection:
- **SIGNS of INFECTION** include:
  - Incision area becoming red and warm to the touch.
  - Drainage leaking from incision site that is cloudy or pus-like.
  - Excessive swelling, or more swelling on one side or the other.

## **WHEN TO CALL THE SURGEON OR OFFICE:**

- Fever over 100.5 for 2 readings taken 4 hours apart.
- Marked increase in redness, swelling, or pain around incision.
- Any excessive bleeding or drainage from your incisions.
- Pain is not relieved by prescription medication.
- Persistent problems with nausea or vomiting.
- **CHEST PAIN** or **TROUBLE BREATHING**: CALL 911 or go to an Emergency Room.