

Caring for myself after Breast Biopsy/Lumpectomy

What are my general guidelines?

1. You will go home with a breast binder. Leave this in place for the first 48 hours. Do not shower for the first 48 hours.
2. Eat a balanced diet and try to maintain good nutrition. Also, drink plenty of fluids. Some of the pain medications can cause constipation, and drinking plenty of water will help prevent this.
3. You may resume light activity as you feel up to it. Avoid any heavy lifting (heavier than 10 pounds), or strenuous activity (including exercise) for one week.

What pain can I expect after surgery?

It is normal to have some pain after surgery. The goal of managing your acute pain after surgery is to minimize your pain enough to feel comfortable getting up, taking deep breaths, wash, get dressed, and do simple tasks in your home. Pain is usually the worst in the first 24-48 hours.

How will I take care of my pain?

You will receive a prescription for a strong pain medication (painkiller) that contains opioids (also called “narcotics”) for **break-through pain**. Break-through pain means pain that is not controlled by Around-The-Clock acetaminophen and ibuprofen. Use the opioid only if you have break-through pain. Alternating over-the-counter medications such as acetaminophen (Tylenol®) or ibuprofen (Motrin®, Advil®), maybe all you need to control your pain.

How will I use medications to relieve pain?

- Take Acetaminophen (Tylenol®) 500-1000mg 4 times per day. The maximum daily dose for an adult is 4000mg per day.
- Take Ibuprofen (Motrin® or Advil®) 400-800mg 3 to 4 times per day. The maximum daily dose for an adult is 3200mg per day. Take ibuprofen (Motrin or Advil) with food to avoid upsetting your stomach.

If your pain is not tolerable with over-the-counter medications alone, take only as much of the opioid prescription painkiller as you need. Start with 1/2 of a pill.

- As your pain goes down start taking less of the prescription painkiller and use Tylenol®, Advil®, or Motrin® instead. This is called “tapering off”.
- Do not drink alcohol or drive while taking narcotic pain medication
- Opioids may cause constipation. If you get constipated, you may need to take a stool softener or laxative. Your pharmacist or us can advise you on this.

Use the diary in the appendix on page 5 to keep track of the amount of pain medications you are taking

For your safety and the safety of others follow these instructions:

- Store opioids in a locked cabinet, out of reach of children.
- Do not keep leftover pain medications after your pain is gone. Safely dispose of pain medications you no longer need. You can find a map of locations to dispose of leftover medication at: <https://michigan-open.org/safe-opioid-disposal/disposal-map/>

How will I care for the incision sites?

1. After 48 hours, you may remove the breast binder and outer dressings. Underneath the dressings is a surgical glue (Indermil) that protects the

incision and will dissolve on its own. The sutures are underneath the skin and will not need to be removed.

2. Wear a supportive, non-underwire bra 24 hours a day for the first week after the surgery.
3. After 48 hours you may shower. For the first week avoid running water directly on the incision, and pat it dry with a clean towel. After the first week, you may begin cleansing your incision with soap and water.
4. Do not apply any creams or ointments to the incision.

When should I watch for when caring for my incisions?

Watch for signs of infection including:

- increase in the swelling or redness near the area of the surgery.
- the skin around the incision becomes hot to the touch.
- green or yellow drainage from the wound which may be pus.
- bad smell around the wound.
- fever over 101°F.
- increasing pain.

Call the clinic if you have any signs of infection. See the contact information below.

What is my follow-up care?

You may already have a follow-up appointment scheduled with your surgeon. At that time we will discuss the results of the pathology report. Otherwise, your surgeon will call you with the final pathology report, and make arrangements for your follow-up appointment at that time. Depending on that report, you may need additional surgery, a referral to another doctor (such as an oncologist), or routine follow-up.

Remember that healing from surgery, even if that surgery seems small, takes time. If you have any questions about your procedure, your follow-up

instructions, or plan of care, do not hesitate to call the Surgical Oncology Nurse Practitioner.

What is the contact information for Surgical Oncology?

- During business hours Monday-Friday 9-4:30 pm call the Surgical Oncology clinic at (734) 936-6000.
- For urgent calls after 4:30 pm, weekends and holidays, ask the operator to page the surgical oncology on-call resident at **(734) 936-6267**.

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Appendix: diary to record the amount of pain medications you are taking. (copy the table to add additional days)

Day 1				
Time	Name of Medication	Amount of Opioid (in mg)	Amount of Acetaminophen (in mg)	Amount of Ibuprofen (in mg)
AM PM				
Total Daily				

Day 2				
Time	Name of Medication	Amount of Opioid (in mg)	Amount of Acetaminophen (in mg)	Amount of Ibuprofen (in mg)
AM PM				
Total Daily				

Day 3				
Time	Name of Medication	Amount of Opioid (in mg)	Amount of Acetaminophen (in mg)	Amount of Ibuprofen (in mg)
AM PM				
Total Daily				

Day 4				
Time	Name of Medication	Amount of Opioid (in mg)	Amount of Acetaminophen (in mg)	Amount of Ibuprofen (in mg)
AM PM				
Total Daily				