

About Your Lumpectomy Surgery

About Your Surgery	3
Before Your Surgery	5
Preparing for Your Surgery	6
Common Medications Containing Aspirin and Other Nonsteroidal Anti-inflammatory Drugs (NSAIDs).....	13
Herbal Remedies and Cancer Treatment.....	18
After Your Surgery	21
What to Expect	22
Resources	25
MSK Resources	26
External Resources.....	28
.....	
.....	
.....	

About Your Surgery

This guide will help you prepare for your breast surgical excision or lumpectomy surgery at Memorial Sloan Kettering (MSK). It will also help you understand what to expect during your recovery. Read through this guide before your surgery and then use it as a reference in the days leading up to your surgery. Bring this guide with you every time you come to MSK, including the day of your surgery. You and your healthcare team will refer to it throughout your care.

You are having surgery to examine a suspicious breast lesion (a lump) or to treat breast cancer. You're having:

- Surgical excision (removal)
- Lumpectomy
- Other _____

A surgical excision removes a lesion that is at a high risk of being cancer. This lesion is then tested to see if it's cancer. Not all lesions are cancerous—some are benign (not cancerous).

A lumpectomy is a surgery that removes a malignant (cancerous) tumor from your breast. It removes only the tumor and a small area of normal tissue around it. A lumpectomy is a breast conserving surgery that allows you to keep your breast shape and, usually, your nipple.

During Your Surgery

Your surgeon will make an incision (a surgical cut) in your breast and remove the lesion, along with a small area of normal tissue around it. They will then close the incision with sutures (stitches), trying to keep the breast looking much like it did before surgery.

The information in this section will help you prepare for your surgery. Read through this section when your surgery is scheduled and refer to it as your surgery date gets closer. It contains important information about what you need to do before your surgery. Write down any questions you have and be sure to ask your doctor or nurse.

Preparing for Your Surgery

You and your healthcare team will work together to prepare for your surgery.

About Drinking Alcohol

The amount of alcohol you drink can affect you during and after your surgery. It's important that you talk with your healthcare providers about your alcohol intake so that we can plan your care.

- Stopping alcohol suddenly can cause seizures, delirium, and death. If we know you're at risk for these complications, we can prescribe medication to help prevent them.
- If you drink alcohol regularly, you may be at risk for other complications during and after surgery. These include bleeding, infections, heart problems, and longer hospital stay.

Here are things you can do to prevent problems before your surgery:

- Be honest with your healthcare provider about how much alcohol you drink.
- Try to stop drinking alcohol once your surgery is planned. If you develop a headache, nausea, increased anxiety, or can't sleep after you stop drinking, tell your doctor right away. These are early signs of alcohol withdrawal and can be treated.
- Tell your healthcare provider if you can't stop drinking.
- Ask us any questions you have about drinking and surgery. As always, all of your medical information will be kept confidential.

Help us keep you safe during your surgery by telling us if any of the following statements apply to you, even if you aren't sure.

- I take a blood thinner. Some examples are aspirin, heparin, warfarin (Coumadin®), clopidogrel (Plavix®), enoxaparin (Lovenox®), dabigatran (Pradaxa®), apixaban (Eliquis®), and rivaroxaban (Xarelto®). There are others, so be sure your doctor knows all the medications you're taking.
- I take prescription medications, including patches and creams.
- I take any over-the-counter medications, herbs, vitamins, minerals, or natural or home remedies.
- I have a pacemaker, automatic implantable cardioverter-defibrillator (AICD), or other heart device.
- I have sleep apnea.
- I have had a problem with anesthesia (medication to make you sleep during surgery) in the past.
- I am allergic to certain medication(s) or materials, including latex.
- I am not willing to receive a blood transfusion.
- I drink alcohol.
- I smoke.
- I use recreational drugs.

About Smoking

People who smoke can have breathing problems when they have surgery. Stopping even for a few days before surgery can help. If you smoke, your nurse will refer you to our Tobacco Treatment Program. You can also reach the program at 212-610-0507.

About Sleep Apnea

Sleep apnea is a common breathing disorder that causes a person to stop breathing for short periods of time while sleeping. The most common type is obstructive sleep apnea (OSA). With OSA, the airway becomes completely blocked during sleep. It can cause serious problems during and after surgery.

Please tell us if you have sleep apnea or if you think you might have it. If you use a breathing machine (such as a CPAP) for sleep apnea, bring it with you the day of your surgery.

Within **30** Days of Your Surgery

Presurgical Testing

Before your surgery, you will have an appointment for presurgical testing (PST). The date, time, and location of your PST appointment will be printed on the appointment reminder from your surgeon's office. You can eat and take your usual medications the day of your PST appointment.

During your appointment, you will meet with a nurse practitioner (NP) who works closely with anesthesiology staff (doctors and specialized nurses who will be giving you medication to put you to sleep during your surgery). Your NP will review your medical and surgical history with you. You may have tests, including an electrocardiogram (EKG) to check your heart rhythm, a chest x-ray, blood tests, and any other tests necessary to plan your care. Your NP may also recommend you see other healthcare providers.

Your NP will talk with you about which medications you should take the morning of your surgery.

It's very helpful if you bring the following with you to your PST appointment:

- A list of all the medications you are taking, including patches and creams.
- Results of any tests done outside of MSK, such as a cardiac stress test, echocardiogram (echo), or carotid doppler study.
- The name(s) and telephone number(s) of your doctor(s).

Complete a Health Care Proxy Form

If you haven't already completed a Health Care Proxy form, we recommend you complete one now. A health care proxy is a legal document that identifies the person who will speak for you if you're unable to communicate for yourself. The person you identify is called your health care agent.

If you're interested in completing a Health Care Proxy form, talk with your nurse. If you have completed one already, or if you have any other advance directive, bring it with you to your next appointment.

Identify Your Caregiver

Your caregiver plays an important role in your care. You and your caregiver will learn about your surgery from your healthcare provider. Your caregiver will need to be present after your surgery for the discharge instructions so that they are able to help you care for yourself at home. Your caregiver will also need to take you home after your surgery.

Arrange for Someone to Take You Home

You must have a responsible care partner take you home after your procedure. Make sure to plan this before the day of your procedure.

If you don't have someone to take you home, call one of the agencies below. They will send someone to go home with you. There's usually a charge for this service, and you will need to provide transportation.

Agencies in New York

Partners in Care: 888-735-8913

Caring People: 877-227-4649

Agencies in New Jersey

Caring People: 877-227-4649

Exercise

Try to do aerobic exercise every day, such as walking at least 1 mile (1.6 kilometers), swimming, or biking. If it's cold outside, use stairs in your home or go to a mall or shopping market. Exercising will help your body get into its best condition for your surgery and make your recovery faster and easier.

Eat a Healthy Diet

You should eat a well-balanced, healthy diet before your surgery. If you need help with your diet, talk with your doctor or nurse about meeting with a dietitian.

10 Days Before Your Surgery

Stop Taking Vitamin E

If you take vitamin E, stop taking it 10 days before your surgery, because it can cause bleeding. For more information, please read *Common Medications Containing Aspirin and Other Nonsteroidal Anti-inflammatory Drugs (NSAIDs)*, located in this section.

Purchase Hibiclens® Skin Cleanser

Hibiclens is a skin cleanser that kills germs for 24 hours after using it (see Figure 1). Showering with Hibiclens before your surgery will help lower your risk of infection after surgery. You can buy Hibiclens at your local pharmacy without a prescription.



Figure 1.
Hibiclens skin cleanser

7 Days Before Your Surgery

Stop Taking Certain Medications

If you take aspirin, ask your surgeon if you should continue. Aspirin and medications that contain aspirin can cause bleeding. For more information, read *Common Medications Containing Aspirin and Other Nonsteroidal Anti-inflammatory Drugs (NSAIDs)*, located in this section.

Stop Taking Herbal Remedies and Supplements

Stop taking herbal remedies or supplements 7 days before your surgery. If you take a multivitamin, talk with your doctor or nurse about whether you should continue. For more information, read *Herbal Remedies and Cancer Treatment*, located in this section.

2 Days Before Your Surgery

Stop Taking Certain Medications

Stop taking nonsteroidal anti-inflammatory drugs (NSAIDs) such as ibuprofen (Advil®, Motrin®) and naproxen (Aleve®) 2 days before your surgery. These medications can cause bleeding. For more information, read *Common Medications Containing Aspirin and Other Nonsteroidal Anti-inflammatory Drugs (NSAIDs)*, located in this section.



Day Before Your Surgery

Note the Time of Your Surgery

A clerk from the Admitting Office will call you after 2:00 PM the day before your surgery. The clerk will tell you what time you should arrive for your surgery. If you're scheduled for surgery on a Monday, you will be called on the Friday before. If you don't receive a call by 7:00 PM, please call 212-639-5014.

Use this area to write in information when the clerk calls:

Date: _____ Time: _____

Shower With Hibiclens

The night before your surgery, shower using Hibiclens. To use Hibiclens, open the bottle and pour some solution into your hand or a washcloth. Move away from the shower stream to avoid rinsing off the Hibiclens too soon. Rub it gently over your body from your neck to your waist and rinse.

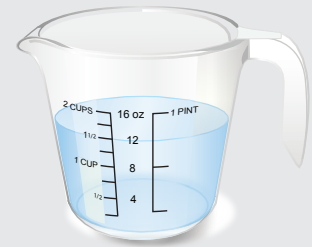
Don't let the solution get into your eyes, ears, mouth, or genital area. Don't use any other soap. Dry yourself off with a clean towel after your shower.

Sleep

Go to bed early and get a full night's sleep.

Instructions for eating and drinking before your surgery

- Do not eat anything after midnight the night before your surgery. This includes hard candy and gum.
- Between midnight and up until 2 hours before your scheduled arrival time, you may drink a total of 12 ounces of water (see figure).
- Starting 2 hours before your scheduled arrival time, do not eat or drink anything. This includes water.



The Morning of Your Surgery

Shower With Hibiclens

Shower using Hibiclens just before you leave. Use the Hibiclens the same way you did the night before.

Don't use any other soap. Don't put on any lotion, cream, powder, deodorant, makeup, or perfume after your shower.

Take Your Medications as Instructed

If your doctor or NP instructed you to take certain medications the morning of your surgery, take only those medications with a sip of water. Depending on what medications you take and the surgery you're having, this may be all, some, or none of your usual morning medications.

Things to Remember

- Don't put on any lotions, creams, deodorants, makeup, powders, colognes, or perfumes.
- Don't wear any metal objects. Remove all jewelry, including body piercings. The equipment used during your surgery can cause burns if it touches metal.
- Leave valuables, such as credit cards, jewelry, or your checkbook at home.
- Before you are taken into the operating room, you will need to remove your eyeglasses, hearing aids, dentures, prosthetic device(s), wig, and religious articles.
- If you wear contact lenses, wear your glasses instead.

- _____
- _____
- _____



What to Bring

- A button-down or loose fitting shirt.
- A supportive bra, such as a sports bra, to wear after your surgery.
- Only the money you may need for a newspaper, bus, taxi, or parking.
- Your portable music player, if you choose. However, someone will need to hold this item for you when you go into surgery.
- Your breathing machine for sleep apnea (such as your CPAP), if you have one.
- A case for your personal items, such as eyeglasses, hearing aid(s), dentures, prosthetic device(s), wig, and religious articles, if you have it.
- Your Health Care Proxy form, if you have completed one.
- This guide. Your healthcare team will use this guide to teach you how to care for yourself after your surgery.
- _____
- _____
- _____

Once You've Arrived for Your Surgery

You will be asked to state and spell your name and date of birth many times. This is for your safety. People with the same or similar names may be having surgery on the same day.

Get Dressed for Surgery

When it's time to change for surgery, you will get a hospital gown, robe, and nonskid socks to wear.

Meet With Your Nurse

You will meet with your nurse before surgery. Tell your nurse the dose of any medications (including patches and creams) you took after midnight and the time you took them.

Your nurse may place an intravenous (IV) line into one of your veins, usually in your arm or hand. If your nurse doesn't place the IV, your anesthesiologist will do it later once you're in the operating room.

Meet With Your Anesthesiologist

Your anesthesiologist will:

- Review your medical history with you.
- Talk with you about your comfort and safety during your surgery.
- Talk with you about the kind of anesthesia you will receive.
- Answer any questions you may have about your anesthesia.

Marking Your Surgical Site

In addition to being asked your name and birth date, you may also be asked the name of your surgeon, what surgery you're having, and which side is being operated on. Your surgeon or another member of the surgical team will use a marker to initial the site on your body that will be operated on. This is for your safety and ensures that all members of your surgical team understand the plan for your surgery.

Prepare for Surgery

Once your nurse has seen you, 1 or 2 visitors can keep you company as you wait for your surgery to begin. When it's time for your surgery, your visitor(s) will be shown to the waiting area.

You will either walk into the operating room or be taken in on a stretcher. A member of the operating room team will help you onto the operating bed. Compression boots may be placed on your lower legs. These gently inflate and deflate to help circulation in your legs.

Once you're comfortable, your anesthesiologist will give you anesthesia through your IV line and you will fall asleep. You will also get fluids through your IV line during and after your surgery.

Common Medications Containing Aspirin and Other Nonsteroidal Anti-inflammatory Drugs (NSAIDs)

This information will help you identify medications that contain aspirin and other nonsteroidal anti-inflammatory drugs (NSAIDs). It's important to stop these medications before many cancer treatments.

Aspirin, other NSAIDs (such as ibuprofen), and vitamin E can increase your risk of bleeding during cancer treatment. These medications affect your platelets, which are blood cells that clot to prevent bleeding.

Read the section “Examples of Medications” to see if your medications contain aspirin, other NSAIDs, or vitamin E.

If you take aspirin, medications that contain aspirin, other NSAIDs, or vitamin E, tell your doctor or nurse. They will tell you if you need to stop taking these medications before your treatment. You will also find instructions in the information about the treatment you're having.

Before Your Surgery

If you're having surgery, follow the instructions below.

- Stop taking medications that contain vitamin E 10 days before your surgery, or as directed by your doctor.
- Stop taking medications that contain aspirin 7 days before your surgery, or as directed by your doctor. If you take aspirin because you've had a problem with your heart or you've had a stroke, be sure to talk with your doctor

before you stop taking it.

- Stop taking NSAIDs 48 hours before your surgery, or as directed by your doctor.

Before Your Radiology Procedure

If you're having a radiology procedure (including Interventional Radiology, Interventional Mammography, and General Radiology), follow the instructions below.

- Stop taking medications that contain vitamin E 10 days before your procedure, or as directed by your doctor.
- If your doctor tells you to stop taking aspirin, stop taking it 5 days before your procedure, or as directed by your doctor. If you take aspirin because you've had a problem with your heart or you've had a stroke, be sure to talk with your doctor before you stop taking it.
 - If you take low dose aspirin (81 mg), you may not need to stop it before your procedure. Your doctor will tell you if you should stop taking low dose aspirin.
- Stop taking NSAIDs 24 hours before your procedure, or as directed by your doctor.

Before and During Your Chemotherapy

Chemotherapy can lower your platelet count, which can increase your risk of bleeding. Whether you're just starting chemotherapy or you've been getting it, talk with your doctor or nurse before taking aspirin or NSAIDs.

Examples of Medications

Medications are often called by their brand name, which can make it hard to know their ingredients. To help you identify medications that contain aspirin, other NSAIDs, and vitamin E, please review the lists below.

These lists include the most common products, but there are others. Check with your healthcare provider if you aren't sure. **Always be sure your doctor**

knows all of the medications you're taking, both prescription and over-the-counter (not prescription).

Common Medications that Contain Aspirin				
Aggrenox®	Bufferin® (most formulations)	Fiorgen®	Momentum®	Soma® Compound Tablets
Alka Seltzer®	Buffets II®	Fiorinal® (most formulations)	Norgesic Forte® (most formulations)	Soma® Compound with Codeine Tablets
Anacin®	Buffex®	Fiortal®	Norwich® Aspirin	St. Joseph® Adult Chewable Aspirin
Arthritis Pain Formula	Cama® Arthritis Pain Reliever	Gelpirin®	PAC® Analgesic Tablets	Supac®
Arthritis Foundation Pain Reliever®	COPE®	Genprin®	Orphengesic®	Synalgos®-DC Capsules
ASA Enseals®	Dasin®	Gensan®	Painaid®	Tenol-Plus®
ASA Suppositories®	Easprin®	Heartline®	Panasal®	Trigesic®
Ascriptin® and Ascriptin A/D®	Ecotrin® (most formulations)	Headrin®	Percodan® Tablets	Talwin® Compound
Aspergum®	Empirin® Aspirin (most formulations)	Isollyl®	Persistin®	Vanquish® Analgesic Caplets
Asprimox®	Epromate®	Lanorinal®	Robaxisal® Tablets	Wesprin® Buffered
Axotal®	Equagesic Tablets	Lortab® ASA Tablets	Roxiprin®	Zee-Seltzer®
Azdone®	Equazine®	Magnaprin®	Saleta®	ZORprin®
Bayer® (most formulations)	Excedrin® Extra-Strength Analgesic Tablets and Caplets	Marnal®	Salocol®	

BC [®] Powder and Cold formulations	Excedrin [®] Migraine	Micrainin [®]	Sodol [®]	
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Common Medications that are NSAIDs that Don't Contain Aspirin

Advil [®]	Clinoril [®]	Indocin [®]	Motrin [®]	Ponstel [®]
Advil Migraine [®]	Daypro [®]	Ketoprofen	Nabumetone	Relafen [®]
Aleve [®]	Diclofenac	Ketorolac	Nalfon [®]	Saleta 200 [®]
Anaprox DS [®]	Etodolac [®]	Lodine [®]	Naproxen	Sulindac
Ansaid [®]	Feldene [®]	Meclofenamate	Naprosyn [®]	Toradol [®]
Arthrotec [®]	Fenoprofen	Mefenamic Acid	Nuprin [®]	Voltaren [®]
Bayer [®] Select Pain Relief Formula Caplets	Flurbiprofen	Meloxicam	Orudis [®]	
Celebrex [®]	Genpril [®]	Menadol [®]	Oxaprozin	
Celecoxib	Ibuprofen	Midol [®]	PediaCare Fever [®]	
Children's Motrin [®]	Indomethacin	Mobic [®]	Piroxicam	

Products that Contain Vitamin E

Amino-Opt-E	Aquavit	E-400 IU	E complex-600
Aquasol E	D'alpha E	E-1000 IU Softgels	Vita-Plus E

Most multivitamins contain vitamin E. If you take a multivitamin, be sure to check the label.

About Acetaminophen

Acetaminophen (Tylenol[®]) is generally safe to take during your cancer treatment. It doesn't affect platelets, so it won't increase your chance of bleeding. However, talk with your doctor before taking acetaminophen if you're getting chemotherapy.

Medications that Contain Acetaminophen

Acephen®	Di-Gesic®	Norco®	Tylenol®
Aceta® with Codeine	Esgic®	Panadol®	Tylenol® with Codeine No. 3
Acetaminophen with Codeine	Excedrin P.M.®	Percocet®	Vanquish®
Aspirin-Free Anacin®	Fiorcet®	Repan	Vicodin®
Arthritis Pain Formula® Aspirin-Free	Lorcet®	Roxicet®	Wygesic®
Darvocet-N 100®	Lortab®	Talacen®	Zydone®
Datril®	Naldegesic®	Tempra®	

Read the labels on all your medications

Acetaminophen is safe when used as directed, but there's a limit to how much you can take in 1 day. It's possible to take too much acetaminophen without knowing because it's in many different medications.

Make sure to always read and follow the label on the product you're taking. Acetaminophen is a very common ingredient found in over-the-counter and prescription medications. It's often an ingredient in pain relievers, fever reducers, sleep aids, and cough, cold, and allergy medications.

The full name acetaminophen isn't always written out. Look for the common abbreviations listed below, especially on prescription pain relievers.

Common Abbreviations for Acetaminophen

APAP	AC	Acetaminop
Acetamin	Acetam	Acetaminoph

Don't take more than 1 medication that contains acetaminophen at a time without talking with a member of your healthcare team.

Herbal Remedies and Cancer Treatment

This information explains herbal remedies and how they can affect your cancer treatment.

One week before you have surgery or start chemotherapy or radiation therapy, you must stop taking any herbal or botanical home remedies or other dietary supplements. This is because they can:

- Interact with your other medications.
- Increase or lower your blood pressure.
- Thin your blood and increase your risk of bleeding.
- Make radiation therapy less effective.
- Increase the effects of sedation or anesthesia (medications to make you sleepy).

You can continue to use herbs in your food and drinks, such as using spices in cooking and drinking tea. However, you must stop taking herbal supplements before your treatment. Herbal supplements are stronger than the herbs you would use in cooking.

Common Herbal Supplements and Their Effects

These are some commonly used herbs and their side effects on cancer treatments.

Echinacea

- Can cause an allergic reaction, such as a rash or difficulty breathing.

- Can lower the effects of medications used to weaken the immune system.

Garlic

- Can lower your blood pressure, fat, and cholesterol levels.
- Can increase your risk of bleeding.

Gingko (also known as *Gingko biloba*)

- Can increase your risk of bleeding.

Ginseng

- Can lower the effects of sedation or anesthesia.
- Can increase your risk of bleeding.
- Can lower your blood glucose (sugar) level.

Turmeric

- Can make chemotherapy less effective.

St. John's Wort

- Can interact with medications given during surgery.
- Can make your skin more sensitive to radiation or laser treatment.

Valerian

- Can increase the effects of anesthesia or sedation.

Herbal formulas

- Herbal formulas contain different herbs. We don't know their side effects. You must also stop taking these products 1 week before treatment. Do not start taking herbal formulas again until your doctor tells you it's safe.

This information does not cover all herbal remedies or possible side effects. Speak with your healthcare provider if you have any questions or concerns.

For more information about herbs and botanicals, visit the Memorial Sloan Kettering (MSK) Integrative Medicine Service website at www.abouterbs.com.

The information in this section will tell you what to expect after your surgery, both during your stay and after you leave. You will learn how to safely recover from your surgery. Write down any questions you have and be sure to ask your doctor or nurse.

What to Expect

When you wake up after your surgery, you will be in the Post-Anesthesia Care Unit (PACU) or your recovery room.

You will receive oxygen through a thin tube called a nasal cannula that rests below your nose. A nurse will be monitoring your body temperature, pulse, blood pressure, and oxygen levels.

After your stay in the PACU or your recovery room, you can go home with your caregiver.

Commonly Asked Questions

How do I care for my incision?

You and your caregiver should look at your incision daily. Call your doctor if you see any redness or drainage from your incision.

Your incision will be closed with sutures (stitches) under your skin. These sutures dissolve on their own, so they don't need to be removed.

- If you go home with Steri-Strips™ on your incision, they will loosen and fall off by themselves. If they haven't fallen off within 14 days, you may remove them.
- If you go home with glue over your incision, it will also loosen and peel off, similarly to the Steri-Strips.

Is it normal to feel new sensations?

As you're healing, you may feel a several different sensations in your breast. Tenderness, numbness, and twinges are common examples.

These sensations usually come and go, and often decrease within the first few months after surgery.

As you continue to heal, you may feel scar tissue along your incision site. It will feel hard. This is common and will soften over the next several months.

Can I shower?

You can shower 24 hours after your surgery. Taking a warm shower is relaxing and can help decrease discomfort. Use soap when you shower and gently wash your incision. Pat the areas dry with a towel after showering, and leave your incision uncovered, unless you have drainage from your incision. If you have drainage, call your doctor's office.

Don't take tub baths, swim, or use hot tubs or saunas until you discuss it with your doctor at the first appointment after your surgery.

Will I have pain when I am home?

The length of time each person has pain or discomfort varies. You will be given a prescription for pain medication before you go home. Follow the guidelines below.

- Take your medications as directed and as needed.
- Call your doctor if the medication prescribed for you doesn't relieve your pain.
- Don't drive or drink alcohol while you're taking prescription pain medication.
- As your incision heals, you will have less pain and need less pain medication. A mild pain reliever such as acetaminophen (Tylenol) or ibuprofen (Advil) will relieve aches and discomfort. However, large quantities of acetaminophen may be harmful to your liver. Don't take more acetaminophen than the amount directed on the bottle or as instructed by your doctor or nurse.
- Pain medication should help you as you resume your normal activities. Pain medication is most effective 30 to 45 minutes after taking it.
- Keep track of when you take your pain medication. Taking it when your pain first begins is more effective than waiting for the pain to get worse.

Pain medication may cause constipation (having fewer bowel movements than what is normal for you).

How can I prevent constipation?

- Go to the bathroom at the same time every day. Your body will get used to going at that time.
- If you feel the urge to go, do not put it off. Try to use the bathroom 5 to 15 minutes after meals.
- After breakfast is a good time to move your bowels because the reflexes in your colon are strongest then.
- Exercise, if you can. Walking is an excellent form of exercise.
- Drink 8 (8-ounce) glasses (2 liters) of liquids daily, if you can.
- Slowly increase the fiber in your diet to 25 to 35 grams per day. Fruits, vegetables, whole grains, and cereals contain fiber.
- Both over-the-counter and prescription medications are available to treat constipation. Start with 1 of the following over-the-counter medications first:
 - Docusate sodium (Colace®) 100 mg. Take ____ capsules ____ times a day. This is a stool softener that causes few side effects. Do not take it with mineral oil.
 - Polyethylene glycol (MiraLAX®) 17 grams daily.
 - Senna (Senokot®) 2 tablets at bedtime. This is a stimulant laxative, which can cause cramping.
- If you haven't had a bowel movement in 2 days, call your doctor or nurse.

Will I be able to eat?

You can resume eating when you go home after surgery. Eating a balanced diet high in protein will help you heal after surgery. Your diet should include a healthy protein source at each meal, as well as fruits, vegetables, and whole grains. If you have questions about your diet, ask to see a dietitian.

When is it safe for me to drive?

You may resume driving after surgery as long as you are not taking prescription pain medication that may make you drowsy, and you have your full range of motion.

How long until I have the pathology results?

The pathology report usually takes to 7 to 10 business days.

When is my first appointment after my surgery?

You will be given a follow-up appointment 1 to 2 weeks after your surgery.

How can I cope with my feelings?

After surgery for a serious illness, you may have new and upsetting feelings. Many people say they felt weepy, sad, worried, nervous, irritable, and angry at one time or another. You may find that you cannot control some of these feelings. If this happens, it's a good idea to seek emotional support.

The first step in coping is to talk about how you feel. Family and friends can help. Your nurse, doctor, and social worker can reassure, support, and guide you. It's always a good idea to let these professionals know how you, your family, and your friends are feeling emotionally. Many resources are available to patients and their families. Whether you're in the hospital or at home, the nurses, doctors, and social workers are here to help you and your family and friends handle the emotional aspects of your illness.

What if I have other questions?

If you have any questions or concerns, please talk with your doctor or nurse. You can reach them Monday through Friday from 9:00 AM to 5:00 PM at the numbers listed below.

Doctor _____ Telephone _____

Nurse _____ Telephone _____

After 5:00 PM, during the weekend, and on holidays, please call 212-639-2000 and ask for the doctor on call for your doctor.



Call your doctor or nurse if you have:

- A temperature of 101° F (38.3° C) or higher
- Shortness of breath
- Warmer than normal skin around your incision
- Increased discomfort in the area
- Increased redness around your incision
- New or increased swelling around your incision
- Discharge from your incision

This section includes a list of MSK support services, as well as the resources that were referred to throughout this guide. These resources will help you prepare for your surgery and recover safely. Write down any questions you have and be sure to ask your doctor or nurse.

MSK Resources

Anesthesia

212-639-6840

Call with any questions about anesthesia.

Blood Donor Room

212-639-7643

Call for more information if you're interested in donating blood or platelets.

Bobst International Center

888-675-7722

MSK welcomes patients from around the world. If you're an international patient, call for help arranging your care.

Chaplaincy Service

212-639-5982

At MSK, our chaplains are available to listen, help support family members, pray, contact community clergy or faith groups, or simply be a comforting companion and a spiritual presence. Anyone can request spiritual support, regardless of formal religious affiliation. The interfaith chapel is located near the main lobby of Memorial Hospital, and is open 24 hours a day. If you have an emergency, please call the hospital operator and ask for the chaplain on call.

Counseling Center

646-888-0200

Many people find counseling helpful. We provide counseling for individuals, couples, families, and groups, as well as medications to help if you feel anxious or depressed.

Integrative Medicine Service

646-888-0800

Integrative Medicine Service offers patients many services to complement traditional medical care, including music therapy, mind/body therapies, dance and movement therapy, yoga, and touch therapy.

Look Good Feel Better Program

800-227-2345

Learn techniques to help you feel better about your appearance by taking a workshop or visiting the program online at www.lookgoodfeelbetter.org.

Patient-to-Patient Support Program

212-639-5007

You may find it comforting to speak with a cancer survivor or caregiver who has been through a similar treatment. Through our Patient-to-Patient Support Program, we are able to offer you a chance to speak with former patients and caregivers.

Patient Billing

646-227-3378

Call Patient Billing with any questions regarding preauthorization with your insurance company. This is also called preapproval.

Patient Representative Office

212-639-7202

Call if you have any questions about the Health Care Proxy form or if you have any concerns about your care.

Perioperative Nurse Liaison

212-639-5935

Call if you have any questions about MSK releasing any information while you're having surgery.

Private Duty Nursing Office

212-639-6892

You may request private nurses or companions. Call for more information.

Resources for Life After Cancer (RLAC) Program

646-888-8106

At MSK, care doesn't end after active treatment. The RLAC Program is for patients and their families who have finished treatment. This program has many services, including seminars, workshops, support groups, counseling on life after treatment, and help with insurance and employment issues.

Social Work

212-639-7020

Social workers help patients, family, and friends deal with issues that are common for cancer patients. They provide individual counseling and support groups throughout the course of treatment, and can help you communicate with children and other family members. Our social workers can also help refer you to community agencies and programs, as well as financial resources if you're eligible.

Tobacco Treatment Program

212-610-0507

If you want to quit smoking, MSK has specialists who can help. Call for more information.

For additional online information, visit LIBGUIDES on MSK's library website at library.mskcc.org or the breast cancer section of www.mskcc.org. You can also contact the library reference staff at 212-639-7439 for help.

External Resources

Access-A-Ride

web.mta.info/nyct/paratran/guide.htm

877-337-2017

In New York City, the MTA offers a shared ride, door-to-door service for people with disabilities who are unable to take the public bus or subway.

Air Charity Network

www.aircharitynetwork.org

877-621-7177

Provides travel to treatment centers.

American Cancer Society (ACS)

www.cancer.org

800-ACS-2345 (800-227-2345)

Offers a variety of information and services, including Hope Lodge, a free place for patients and caregivers to stay during cancer treatment.

Cancer and Careers

www.cancerandcareers.org

A comprehensive resource for education, tools, and events for employees with cancer.

CancerCare

www.cancercare.org

800-813-4673

275 Seventh Avenue (between West 25th & 26th Streets)

New York, NY 10001

Provides counseling, support groups, educational workshops, publications, and financial assistance.

Cancer Support Community

www.cancersupportcommunity.org

Provides support and education to people affected by cancer.

Caregiver Action Network

www.caregiveraction.org

800-896-3650

Provides education and support for those who care for loved ones with a chronic illness or disability.

Corporate Angel Network

www.corpangelnetwork.org

866-328-1313

Offers free travel to treatment across the country using empty seats on corporate jets.

Gilda's Club

www.gildasclubnyc.org

212-647-9700

A place where men, women, and children living with cancer find social and emotional support through networking, workshops, lectures, and social activities.

Good Days

www.mygooddays.org

877-968-7233

Offers financial assistance to pay for copayments during treatment. Patients must have medical insurance, meet the income criteria, and be prescribed medication that is part of the Good Days formulary.

Healthwell Foundation

www.healthwellfoundation.org

800-675-8416

Provides financial assistance to cover copayments, health care premiums, and deductibles for certain medications and therapies.

Joe's House

www.joeshouse.org

877-563-7468

Provides a list of places to stay near treatment centers for people with cancer and their families.

LGBT Cancer Project

<http://lgbtcancer.com>

Provides support and advocacy for the LGBT community, including an online support groups and a database of LGBT friendly clinical trials.

LIVESTRONG Fertility

www.livestrong.org/we-can-help/fertility-services

855-744-7777

Provides reproductive information and support to cancer patients and survivors whose medical treatments have risks associated with infertility.

National Cancer Institute

www.cancer.gov

800-4-CANCER (800-422-6237)

National Cancer Legal Services Network

www.nclsn.org

Free cancer legal advocacy program.

National LGBT Cancer Network

www.cancer-network.org

Provides education, training, and advocacy for LGBT cancer survivors and those at risk.

Needy Meds

www.needymeds.com

Lists Patient Assistance Programs for brand and generic name medications.

NYRx

www.nyrxplan.com

Provides prescription benefits to eligible employees and retirees of public sector employers in New York State.

Partnership for Prescription Assistance

www.pparx.org

888-477-2669

Helps qualifying patients without prescription drug coverage get free or low-cost medications.

Patient Access Network Foundation

www.panfoundation.org

866-316-7263

Provides assistance with copayments for patients with insurance.

Patient Advocate Foundation

www.patientadvocate.org

800-532-5274

Provides access to care, financial assistance, insurance assistance, job retention assistance, and access to the national underinsured resource directory.

RxHope

www.rxhope.com

877-267-0517

Provides assistance to help people obtain medications that they have trouble affording.

SHARE

www.sharecancersupport.org

866-891-2392

Offers support groups for survivors of breast, metastatic breast, and ovarian cancer in Manhattan, Queens, Brooklyn, and Staten Island.