



Operation Information

Axillary Dissection

Introduction

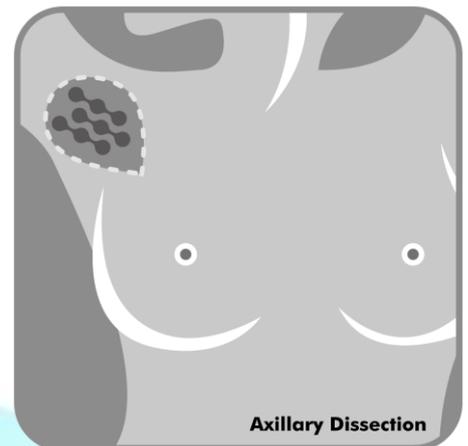
Axillary Dissection refers to the removal of two-thirds of the axillary lymph nodes (Level II Dissection).

Outcomes

This surgical procedure is frequently included in operation for breast cancer. Also this procedure is an important procedure in cancer staging.

Procedures

1. The operation is performed under general anaesthesia.
2. An incision is made to remove fat and lymph nodes at axilla. (If mastectomy is contemplated, axillary dissection will be done via mastectomy wound)
3. A drainage tube will be inserted.
4. Wound is sutured.



Possible Risks and Complications

1. Wound infection
2. Wound haematoma (may require another operation for removal)
3. Wound effusion (may remove by drainage)
4. Lymphoedema (10%)
5. Nerve injury to adjacent area
6. Frozen shoulder
7. Scar formation

** The risks listed above are in general terms and the possibility of complications is not exhaustive. Please understand that even though all operations are carried out with utmost professionalism and care, this does not rule out the possibility of complications arising. In the event of peripheral organ damage or post-operative haemorrhage or leakage, further operations may be required.

Pre-operative Preparations

1. Good hygiene can prevent surgical wound infection. Therefore, we advise you to clean up yourself on the day of operation.
2. The procedure and possible complications will be explained by the doctor and a consent form must be signed prior to the operation.
3. Please inform the doctor and nurse all your past medical history, previous surgical operations, current medication and any complication with drug or anaesthesia.
4. Nursing staff will instruct you to use antiseptic for cleaning the skin. Shave underarm hair completely.

5. May need pre-medications and intravenous drip.
6. Antibiotic prophylaxis or treatment may be required if necessary.
7. No food or drink six to eight hours before operation.
8. Please change into a surgical gown after removing all belongings including undergarments, dentures, jewelry and contact lenses.
9. Please empty your bladder before the operation.

Post-operative Instructions

General

1. After general anaesthesia, you may:
 - experience discomfort in the throat after tracheal intubation.
 - experience side effects of anaesthesia including feel tired, drowsy, nausea or vomiting. Inform the nurse if symptoms persist or worsen.
2. Please inform the nurse(s) for wound pain. Analgesics may be given as prescribed by the doctor.
3. Avoid having your blood pressure taken on the affected side.

Wound Care

1. After operation, the wound will be covered by a sterile transparent waterproof dressing. A vacuum wound drain will be present for drainage of blood and lymph so as to promote wound healing. Pay special attention to the drain during mobilization.
2. Nurse will empty the drain as per doctor's instruction. The drain can only be removed when the drainage is minimal.
3. Please keep the wound clean and dry.
4. Wear loose clothing to avoid pressure on the affected area. Shirt which opens in the front is most preferable.

Diet

Resume normal diet after the effects of the anaesthetic worn off.

Activities

1. On the day following the operation, usually you can get out of bed and commence upper limb exercise (according to doctor's instruction). Nursing staff will instruct and reinforce the exercise according to the progress. You may take a pain reliever half an hour prior starting the exercise.
2. Early mobilization promotes rapid recovery. Level of exercise depends on tolerance of individual patient.
3. Do not lift or carry heavy object with the affected limb.

Advice on Discharge

1. Depends on circumstance, you can be discharged one or two days after the operation.
2. Resume the daily activities gradually and continue the limb exercise.
3. Nurse will teach you the drain care if you are discharged with the drain.
4. Immediately consult your doctor or return to hospital for professional attention in the event of severe wound pain and redness, tenderness, pus or blood oozing, shivering, high fever over 38°C or 100.4°F, or any other unusual symptoms etc.
5. Any follow-up consultations should be attended as scheduled.

Should there be any enquiries or concerns, please consult the attending doctor.

Under the professional care of the doctor, you will gradually recover. We wish you all the best during your treatment and recovery.

If you have any questions after reading the entire leaflet, please write them down in the spaces provided in order for the doctor to further follow-up.

Compiled by Union Hospital Operating Theatre (OT) Governance Committee

The above information is for reference only, please enquire your physician for details
Our Hospital reserves the RIGHT to amend any information in this leaflet without prior notification

