



## Operation Information

### Simple Mastectomy

#### Introduction

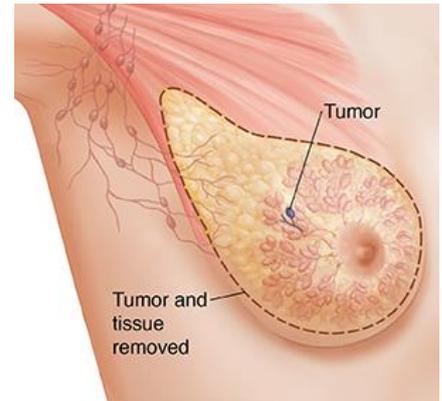
Simple Mastectomy is one of the operation options for breast cancer. The involved breast together with the nipple is removed.

#### Outcomes

The operation will remove all the breast tissue.

#### Procedures

1. The operation is performed under general anaesthesia.
2. An elliptical incision is made to include the nipple areolar complex and the skin overlying the primary tumour.
3. All the breast tissue is removed.
4. Tube drain(s) will be inserted.
5. Wound closed with suture or surgical staples/ clips.



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#### Possible Risks and Complications

1. Wound infection
2. Wound haematoma (may require another operation for removal)
3. Flap necrosis
4. Bleeding (may require re-operation to evacuate the blood clot)
5. Hypertrophic scar and keloid 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. Shaving on the operation site may be required.
5. Before your operation a doctor will mark the side you are to be operated on. Please do not washing off the marking.
6. Pre-medication may be necessary as doctor's prescription.
7. No food or drink six to eight hours before operation.
8. Please change into a surgical gown after removing all clothing including undergarments, dentures,

- jewellery 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 includes feeling 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.

### **Wound Care**

1. After operation, the wound will be covered by a sterile dressing. A vacuum wound drain will be present for drainage. Pay special attention to the drain during mobilization.
2. Nurse will empty the drain as per doctor's instruction.
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 wear 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 two or few days after the operation.
2. Please comply with medication regime as prescribed by your doctor.
3. Nurse will teach you the drain care if you are discharged with the drain.
4. Resume the daily activities gradually and continue the limb exercise.
5. Temporary prosthesis can be used in the first 6 weeks after operation. The permanent silicone prosthesis can be fitted when the wound healed completely.
6. The wound will heal in three to four weeks and sexual life can be resumed. Some patients may have certain degree of psychological disturbance and they are encouraged to communicate with their partners and consult the doctor or nurse whenever necessary.
7. 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.
8. 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.

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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

