

Procedure Information Sheet -Breast Conserving Surgery

Introduction

- ➤ Breast Conserving Surgery/Treatment (BCT) is one of the surgeries for treatment of breast cancer. The surgeon will remove the cancer with clear margin and preserve other normal breast tissue for good cosmetic result.
- ➤ Breast Conserving Surgery may be performed in conjunction with sentinel lymph node biopsy and / or axillary dissection for patients with invasive carcinoma. Patients may receive radiotherapy shortly after the operation for reducing local recurrence.
- A second operation: re-excision for margin clearance or mastectomy may be needed if the margins of the specimen are involved or close to the tumor.

Procedure

The operation is performed under general anaesthesia; surgeons utilize palpation, ultrasonic or hook wire localization locate the tumor and frozen section examination may be used to examine the margin status during the operation.

Pre-operative preparation

- 1. You will need to sign a consent form and your doctor will explain to you the reason, procedure and possible complications.
- 2. Inform your doctor about drug allergy, your regular medications or other medical conditions.
- 3. Fast for 6-8 hours before operation.
- 4. Admit one day before operation for routine investigations such as blood taking, CXR, ECG, Urine analysis etc.
- 5. Remove nail polish and jewelry and avoid treasures before admission.
- 6. Skin preparation for shampooing and bathing.

Possible risks and complications

- Complications related to anaesthesia.
- > Wound infection.
- Haematoma.
- May need a second operation of re-excision of the margin or Mastectomy.

Post-operative information

A. Hospital care

- 1. Vital sign monitoring and wound observation.
- 2. Avoid blood pressure monitoring, blood taking, intravenous infusion or injection in operative upper limb.
- 3. Encourage for deep breathing exercise after general anaesthesia.

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- 4. Inform nurse when feeling of nausea, vomiting or wound pain. Antiemetic and pain killer can be taken as prescribed by your doctor.
- 5. Wound cover by dressing and it would change after wound inspection from your doctor.
- 6. A drain will be inserted and it is usually kept for few days and removed according to your doctor's instruction.
- 7. Resume normal diet. Remove the intravenous infusion according to doctor prescription.
- 8. Start daily activity and shoulder exercise gradually according to your doctor's advice.
- 9. Refer to Physiotherapist for training if necessary.
- **B.** *Nutrient:* Normal diet without foods limitation except disease requires.
- **C.** *Activity:* Daily activity can be started gradually as tolerate. Avoid heavy lifting and excess exercise in the affective limb.
- **D.** *Sex-life:* You may resume your sex life after the wound has healed. Share your feelings and anxiety to your partner can help for recovery. Remember the sexual intercourse will not transmit cancer to your partner.
- **E.** *Follow up:* Follow up as instructed by your doctor.

Remark

The above mentioned procedural information is not exhaustive, other unforeseen complications may occur in special patient groups or different individual. Please contact your physician for further enquiry.

Reference: http://www21.ha.org.hk/smartpatient/tc/operationstests_procedures.html

Dr		on concerning my operation/procedure has been explained to me by given the opportunity to ask questions and receive adequate explanations atment plan.
Name:		
Pt No.:	Case No.:	Patient / Relative Signature:
Sex/Age:	Unit Bed No:	Patient / Relative Name:
Case Reg Date & Time:		Relationship (if any):
Attn Dr:		Date:

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