



NORTHEAST PLASTIC SURGERY  
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## **Latissimus Dorsi Flap**

### Post-operative Instructions

- ▶ Your post-operative appointment is scheduled for \_\_\_\_\_.
- ▶ Do not remove any remaining dressings upon discharge from the hospital, as they will be addressed at your first post-operative visit.
- ▶ Please do not wear a bra or even postoperative surgical garment, as they can cause compression to the blood supply and affect the latissimus flap.
- ▶ Keep your dressings dry. Sponge bathe only until further instructed. Usually, you may shower 48 hours after final drain removal.
- ▶ Empty your drains every 12 hours and record the measurements for each drain, separately and labeled by location and side, on your chart. Please bring the chart with you to your office visits. The amounts that are draining from each drain will determine when each drain may be removed. The drains are usually removed within 1-2 weeks, but a number of factors can influence the duration. Once each drain is removed, you should keep a dry gauze dressing for 48 hours over the former sites on the skin to prevent drainage onto your clothing but then may discontinue the drain dressings altogether after those 48 hours.
- ▶ If a tissue expander was placed at the time of your latissimus flap surgery, your office-based tissue expansion will usually begin the week following breast drain removal, but no earlier than 2 weeks post-operatively.
- ▶ If a liquid skin adhesive (glue) was used along your incisions, it may take several weeks to dissolve. Do not apply ointments such as Bacitracin directly over the glued area unless instructed, as this may prematurely dissolve this dressing.
- ▶ You have received prescriptions for \_\_\_\_\_ as an antibiotic and \_\_\_\_\_ for pain relief. Postoperative pain management includes other modalities that are non-narcotic based to minimize reliance on such medications. You may stop taking your antibiotic after the final drain has been removed, or unless otherwise directed. Please take Colace as a stool softener to limit constipation.
- ▶ Avoid the following anti-platelet agents until at least your first post-op appointment, including, but not limited, to: ibuprofen products (Advil, Motrin), Aleve, Naprosyn, Celebrex, Toradol, fish oil, herbals, and supplements including those containing Vitamin E, as they result in a higher risk of bleeding.

- ▶ If you are taking the following blood thinners or anti-platelet agents, you should have already obtained instructions pre-operatively when they may resume, but please discuss with your surgical team: aspirin, Coumadin (warfarin), Lovenox, Plavix, Pletal, Effient, Aggrenox, Pradaxa, Savaysa, Xerelto, Eliquis, or Brilinta.
- ▶ Do not consume alcohol while you are taking any medications following surgery, especially pain medications, muscle relaxants, anti-anxiety medications, sleeping pills, or other sedatives.
- ▶ You may resume your pre-operative diet as tolerated.
- ▶ Restrictions are as follows:
  - ▶ Do not lay flat in bed. Sleep with your head elevated on at least 2 pillows until otherwise directed. Do not lay upon or put any pressure upon the side(s) of your chest where the flap reconstruction was performed.
  - ▶ Keep the arm(s) on the reconstructed side(s) elevated on one pillow and about one foot away from the side of your chest to avoid compression on the internal blood supply to the flap while sleeping.
  - ▶ You will be walking prior to discharge from the hospital.
  - ▶ No driving for at least 3 weeks. You will be restricted from driving until all narcotic medications have been stopped.
  - ▶ No raising your arm(s) above the level of your shoulder level for 3 weeks.
  - ▶ No heavy lifting (> 5 lbs) for 6 weeks.
  - ▶ Avoid vigorous running, jumping, pushing, and pulling for 8 weeks.
  - ▶ Avoid hot or cold packs against your skin, as skin changes may occur because of sensory changes.
- ▶ Because of the nature of your procedure, you may be at unintended risk of taking shallow breaths to limit your post-operative discomfort. However, shallow breathing can result fevers related to underuse of the lungs, and even pneumonia. Please make sure to utilize an incentive spirometer to ensure deep, active breaths to prevent these issues.
- ▶ Please refrain from nicotine-containing products for at least 6 weeks following your surgery. Nicotine reduces circulation and can therefore result in wound healing impairment.
- ▶ Every patient and procedure is unique. However, please alert us if you observe any of the following and are concerned:
  - ▷ temperature  $\geq 101.4^{\circ}\text{F}$
  - ▷ increased redness at the surgical site or adjacent site(s)
  - ▷ worsening bruising at the surgical or adjacent site(s)
  - ▷ blisters at the surgical site(s)
  - ▷ increased swelling or size leading to significant and sudden asymmetry
  - ▷ unrelenting or increasing pain at the surgical site(s)
  - ▷ significant drainage at the surgical site

- There are a number of different modalities that can limit scar formation post-operatively. Starting 2 weeks post-operatively, we may recommend that you utilize silicone sheeting such as Epi-Derm™ Silicone Gel Strips from Biodermis™. This therapy may be purchased directly through [www.biodermis.com](http://www.biodermis.com). Silicone sheets should be applied overlying the healing scar for at least 12 hours daily, and ideally closer to 24 hours daily, with gentle cleansing of the scar performed once daily. An individual sheet may be re-used multiple times, with the average lifespan being 7-10 days. Alternatively, you may choose to utilize any number of silicone scar reduction gels, such as Mederma® or Biocorneum®, and massage in a thin coat twice daily to the scar for 2-3 months. We recommend silicone gel with the added embedded SPF component.