FOLLOW UP
You will be given an outpatient appointment for 10-14 days after your operation. Please bring a friend or relative with you. The result of your biopsy will be given to you at this appointment. Your stitches will usually be dissolvable or will be taken out in clinic.

RETURN TO WORK
The amount of time you need off work will vary depending on how physical your job is. Most people will need a minimum of 4-6 weeks, however your Surgeon/Clinical Nurse Specialist will be able to give you further advice. The ward will be able to supply you with a sick certificate if you require.

WHO TO CONTACT IF YOU NEED ADVICE
WITHIN WORKING HOURS: (mon-fri 9-3pm)
The Breast Care Nurses.
Nadine Teuton 01895 279738
Terry-Anne Leeson 01895 279711

OUT OF WORKING HOURS (evenings, weekends)
Please telephone the main hospital switchboard on 01895 238282 and ask to speak to staff on the ward where you stayed.
NT 2020

AXILLARY SURGERY
This refers to the removal of lymph glands under your arm, to determine any appropriate future treatments you may require. The amount of lymph glands removed varies from person to person. For more detailed information please speak to your Surgeon or Clinical Nurse Specialist. The lymph system in your body is made up of lymphatic vessels (similar to blood vessels) and the lymph glands extend throughout your body. The lymph system acts by returning fluid (mainly water) from the tissues back into your blood system. The lymph glands or nodes act as a filter against unwanted materials such as bacteria and therefore help to prevent infection.
You may have one or two ‘drains’ in your wound. This is a small plastic tube attached to a plastic bottle. It is inserted during surgery and will collect any excess fluid or blood. You can go home with drain and come back to the ward for it to be removed.

LYMPHOEDEMA
Because some or most of the lymph glands will have been removed you will be at a slightly increased risk of developing lymphoedema- (swelling caused by a build up of lymph fluid in the tissues of your arm).
To help prevent lymphoedema you can:
• Exercise your arm. You will receive an exercise sheet during your hospital stay
• Look after your skin by gentle applying moisturiser daily
• If you notice a rash or your arm becomes red and painful contact your G.P or Clinical Nurse Specialist in case you need antibiotics
• Treat any scratches cuts or insect bites. Wash the area immediately, keep clean and apply antiseptic cream
• Use insect repellent
• Wear gloves and long sleeves when gardening
• Wear gloves when washing up
• Avoid getting sunburnt on your arm, use sun cream
• Wherever possible have any injections, blood tests and blood pressure taken in your unaffected arm
• Be careful when removing unwanted underarm hair. Use an electric razor or hair removing cream
• Avoid constricting your arm, for example wearing tight jewellery or watches
• Avoid long periods of strenuous exercise, for example pushing and pulling or heavy lifting.

OTHER POSSIBLE COMPLICATIONS

Infection- As with any surgical procedure, there is a small risk of infection. Should your wound become red/hot and feel more painful (which may be accompanied by you feeling generally unwell), you should contact your GP or Clinical Nurse Specialist as soon as possible.

Pain- You may also experience pain/ discomfort/ bruising/ swelling around the wound site. You will be given a supply of painkillers to take home with you. If you need a repeat prescription then see your G.P.

Seroma- A seroma is a collection of fluid beneath the wound. This fluid is usually re-absorbed by the body over time. However, if it causes discomfort then please call your Clinical Nurse Specialist Nurse, as it may be necessary to draw off the fluid with a needle and syringe. This procedure is usually quite painless because the surrounding tissue feels numb.

Cording- Sometimes you may develop a tight pain that can feel like a cord running from your armpit down your arm and to your hand. It can usually appear 6-8 weeks after surgery. You may be able to feel cord-like lumps in your arm and this may impede your arm movement. If cording occurs please contact your Clinical Nurse Specialist as you may need to have some extra physiotherapy to stretch your arm.

Changes or loss of sensation- You may experience a change or loss of sensation in your arm and chest due to unavoidable nerve damage. You may also feel numbness or coldness, weakness in your arm, sensitivity to touch and a burning or tingling sensation.

Most of these feelings will disappear or improve 3 months after surgery. However you may experience some permanent loss of sensation.

RARE COMPLICATIONS

Long-standing breast/arm pain due to nerve damage.
As with any operation there is a very small risk of developing a chest infection or blood clots in your legs/arms/lungs.

BATHING
You may bath or shower but try to keep your dressing dry. Unfortunately you will not be able to use deodorant until your wound has healed. Your Surgeon or Clinical Nurse Specialist will advise you at your post op appointment.

DRIVING
It can usually take around 2-4 weeks until you will feel comfortable to drive.