



MOUNTAIN STAR

Lakeview Hospital

General Surgery

Lakeview General Surgery

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Post Operative Instructions for Breast Biopsy

Description of Procedure

For patients who have a palpable breast mass or lump or an abnormal mammogram a biopsy is often indicated. Some abnormalities can be biopsied by stereotactic techniques or needle biopsies. For others, an open biopsy is often times indicated. An open biopsy is done often times done with the help of a radiologist who under mammographic guidance will place a fine wire into the breast tissue identifying for the surgeon the position of the mass. A small incision is made in the skin and the lump or mammography abnormality is then removed surgically and the wound is closed with absorbable sutures.

Post operative pain

Postoperative pain from an open breast biopsy is generally moderate. Most patients require several days of narcotic medication for adequate pain control. This can be supplemented in most patients with anti-inflammatory medications such as Motrin® or Advil® taken 3 times daily or every 8 hours with food.

Common findings

After surgery most patients will note significant bruising around the incision site. Often times this bruising can be circular or predominantly inferior to the incision site and can be a deep purple and intense in nature. Patients will also note swelling in the incision site and often times will note hardness or lumpiness directly beneath the incision often time more prominent than the lump that was removed. This will resolve without further treatment over the next several weeks.

Common things to watch for after surgery

- #1. Infection.** Although bruising is common and expected, should redness, increased pain, increased swelling or pus discharge from the wound be noted the surgeon should be notified immediately.
- #2. Fluid Accumulation.** Often times with an open breast biopsy inflammatory fluid will accumulate underneath the wound. Patients will note intense swelling and sometimes will feel or hear fluid moving beneath the incision and sometimes clear fluid may drain from the incision. Should these things occur your surgeon should be notified immediately.
- #3. Postoperative bleeding.** This occurs rarely in patients with open breast biopsies. If this bleeding drains through the incision, fingertip pressure held over the incision while the patient is lying down for 20 minutes will control any bleeding. Should this occur internally the patient would note dramatic swelling within the breast, dramatic bruising and a large firm mass beneath the incision. Should this occur your surgeon should be notified immediately. However, the amount of blood that is lost in an open breast biopsy is generally not significant and will not approach dangerous levels.
- #4. Constipation.** Narcotic pain medication commonly causes constipation in postoperative patients. It is almost always appropriate to take a stool softener such as Colace® once in the morning and once at night in order to lessen the effects of constipation from the narcotics. Should you still be constipated after surgery a Docolax® suppository, which can be obtained over the counter, can be used once in the morning and once at night as needed to produce a bowel movement. Some patients also find benefit from using milk of magnesia 30cc by mouth in the morning and at night until bowel movements resume. Should these over the counter medications be inadequate to produce normal bowel movements please call your doctor to receive additional instructions.

Post operative restrictions

Most people can resume normal activities immediately following surgery. Rigorous activities; heavy lifting or exercise should be delayed for 2 to 3 days after surgery.

Follow Up

Your surgeon will call you when the final pathology report is available. You should call the office and schedule a post operative exam 7 to 10 days after surgery. After a routine open breast biopsy, routine breast care should be continued including monthly self-exams, yearly mammograms and yearly physician visits for those above the age of 35.