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## Comprehensive Breast Health Program at NorthShore University HealthSystem

The Breast Health Program of NorthShore University HealthSystem uses a patient centered multidisciplinary approach to all patients diagnosed with breast cancer, and you will see a team of breast specialists throughout your treatment.

In addition, we conduct a weekly breast cancer conference where all newly diagnosed breast cancer patients are presented to the breast cancer team to allow discussion of treatment options. Our team is made up of medical oncologists, breast surgeons, radiation oncologists, breast imagers, pathologists, geneticists, plastic reconstructive surgeons and nurses that all specialize in breast care.

We have four fully functional breast centers at Evanston, Glenbrook, Skokie and Highland Park Hospitals that provide digital mammography, breast ultrasound, and breast MRI. Each is staffed by fellowship trained breast imagers, breast surgeons, and breast nurse specialists.

Some of our other strengths and services include:

- First comprehensive breast center in the Chicagoland area to receive full accreditation from the National Accreditation Program for Breast Centers of the American College of Surgeons.
- Nationally recognized Center for Medical Genetics.
- Lymphedema Treatment Program.
- Nationally recognized cancer survivorship program (the LIFE Program).
- Cutting edge research in basic science and clinical trials.

We feel privileged to be your treatment team and we want to make your experience with us as comforting as possible. Please do not hesitate to contact us with any questions or concerns at (847) 570-1700. We are here to share our experience and expertise with you.

The Breast Center Staff



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## Patient Instructions for Major Operating Room Surgery

You have been scheduled for a procedure in the major operating room. You will receive either general anesthesia or IV sedation. Please follow these guidelines.

- Call your surgeon's office to schedule the surgery at \_\_\_\_\_

- Notify your primary care physician about the date of surgery and arrange for your preoperative 'history and physical' and 'preoperative testing' (ie: blood work, electrocardiogram, chest xray, nasal swab, etc). Your surgeons' office will advise you as to what is required for your preoperative testing. Note: 'history and physical' and nasal swab must be done within 30 days before the surgery. If you would like a history and physical and all preoperative testing can be scheduled with the nurse practitioners at (847) 570-4710.
- Stop aspirin (or any aspirin containing medications), vitamin E, ibuprofen (advil, motrin), naproxen/nasprosyn (aleve), and herbal medications/supplements (including herbal and green teas) 7 days before and 3 days after surgery. Note: you may take Tylenol, Celebrex, regular and decaf coffee and tea. Please notify your surgeon if you take coumadin, plavix, lovenox, heparin or any 'blood thinning medication or you have a pacemaker, sleep apnea or you take metformin/glucophage.
- Do not bring any valuables, credit cards, wallets, check-books or cash with you on the day of surgery. Do bring your insurance card. Note: all jewelry will need to be removed prior to surgery. Finger nail polish does not need to be removed. Do bring your glasses and case. If you wear contact lenses, they will need to be removed for surgery, so, please bring your contact case and solution.

- You will receive a call from the pre-surgery nurse the day prior to your surgery to confirm your surgery time and they will also discuss which of your medication (if any) should be taken the morning of surgery. If you miss their call, you can contact them at:

Evanston: (847) 570-2150  
Glenbrook: (847) 657-5832  
Highland Park: (847) 480-3729  
Skokie: (847) 933-6816

- Do not eat or drink anything after midnight the day before surgery. This includes water, coffee, gum, candy. No smoking or alcoholic beverages the day before surgery. On the day of surgery, you may brush your teeth and use mouthwash, being careful not to swallow any liquids.
- You will need to arrange for transportation home from the hospital after your surgery.
- If you would want to talk to an anesthesiologist before the surgery, you may make an appointment by calling the anesthesia department at the hospital where you are having surgery.

Evanston: (847) 570-2760  
Glenbrook: (847) 657-5812  
Highland Park: (847) 480-3852  
Skokie: (847) 933-6908

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## Information Guide: *Staphylococcus aureus* *To be done about 2 weeks before surgery*

### What is *Staphylococcus aureus*?

It is a germ, often called Staph, which is normally found on the body in 20-30% of healthy people. Throughout our lives, all of us have this germ colonizing us at one time or another. It usually causes no illness, but occasionally can cause infections. These range from small sores on the skin, to boils (abscesses), to blood poisoning (infection of the bloodstream). Occasionally (less than 5% of the time) an infection develops after surgery. When infection occurs after surgery, the single biggest cause is *S. aureus*.

### What can be done to prevent infection from *S. aureus* (Staph) after my surgery?

Medical professionals have known for many years that most Staph infections developing after surgery result from the same *S. aureus* that you, as a patient, normally carry prior to your operation. During the last year it was shown that getting rid of any Staph someone may be carrying could reduce the likelihood of a *S. aureus* infection after surgery by 50 to 70%. In order to provide our patients with the best possible surgical outcome, we are now screening all patients for *S. aureus* before any orthopedic, cardiothoracic, vascular, general or neurosurgical operation. Those with a positive test will be treated with a nasal ointment (Bactroban) for 5 days to remove the Staph. If your culture shows that the staph is methicillin resistant (MRSA) you will also have to shower with Hibiclens soap on day 1, 3, and 5 of nasal treatment, to lower the chance for infection.

### What is the difference between infection and colonization?

**Infection** means that the germ is causing a problem or disease in your body with symptoms such as fever, redness/swelling and/or

pus at the site of your infection. **Colonization** means the germ has taken up residence in or on your body, and is not currently causing infection. If you are colonized with Staph, you have the potential to develop an infection from it after an operation.

### What if my test is positive?

If the test is positive for Staph, you will receive treatment prior to surgery with Bactroban nasal ointment. If it is a methicillin resistant staph you will also have to shower with Hibiclens soap.

### Patient Notes:

- Apply the nasal ointment twice a day for 5 days (12 hours apart).
- Use a Q-tip or your finger to apply the medicine.
- Avoid contact of the medication with the eyes.
- Call your surgeon to discontinue usage of the medication if severe local irritation occurs.

### Instructions for Hibiclens shower if your staph is methicillin resistant (MRSA)

1. Shower or bathe with Hibiclens (4% chlorhexidine) on days 1, 3, and 5 of nasal treatment.
2. Use 2 tablespoons of soap as you would any other liquid soap. It will not bubble or lather.
3. Rinse completely after the shower or bath.
4. AVOID CONTACT OF THE SOAP WITH YOUR EYES AS THIS CAN CAUSE IRRITATION. If some soap gets in your eyes, rinse thoroughly with water.
5. Discard Hibiclens container in regular garbage when finished with total treatment.

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## Breast MRI

Breast MRI is a relatively new imaging modality for breast cancer and high risk patients. We have been performing breast MRI at NorthShore for over six years. NorthShore currently has a study looking at the utility of breast MRI in newly diagnosed breast cancer patients. Below are some frequently asked questions about breast MRI:

### What are the contraindications for breast MRI?

Any metal implant or history of claustrophobia are the main contraindications for breast MRI. There are other contraindications and the MRI Department will call you ahead of time to review these before your MRI exam. There are no “open” breast MRI machines.

### Will my insurance company cover my breast MRI for cancer?

Most insurance companies will cover a breast MRI for cancer. NorthShore will obtain a precertification from your insurance company prior to performing the MRI and this process can take a couple of days to complete. The breast nurse specialists in the breast center will work with you to get your MRI scheduled.

### Does a breast MRI involve contrast injection?

Yes. You will have an IV placed to infuse the contrast. The contrast in the cancer is key to understanding its characteristics. Patients with severe kidney disease may not be candidates for this contrast injection and thus will not be candidates for breast MRI.

### Contact Information

Please contact your physician with any further questions. To schedule an MRI, call (888) 364-6400.

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## Breast Cancer Support Resources

### American Cancer Society

(General Information and *Reach to Recovery*)

[www.cancer.org](http://www.cancer.org)

1-800-4-CANCER (1-800-227-2345)

North Suburban office (847) 328-5147

Lake County office (847) 317-0025

Provides free written materials regarding breast cancer.

*Reach to Recovery*: trained breast cancer survivor volunteers provide emotional support.

### American Breast Cancer Foundation

[www.abcf.org](http://www.abcf.org)

1-877-Key-2-Life (1-877-539-2543)

Provides breast cancer screening services and breast cancer education.

### AMC Cancer Research Center

Cancer Information Line

[www.healthywomen.org](http://www.healthywomen.org)

1-877-986-9472

Provides information for the prevention and control of cancer and other chronic diseases.

### Apps

**Ibreastcheck**

Breast self exam instructions and reminder.

### Breast Cancer.net

[www.breastcancer.net](http://www.breastcancer.net)

Provides latest news on breast cancer research and treatment.

### Breast Cancer.org

[www.breastcancer.org](http://www.breastcancer.org)

Breast cancer education site including articles, news, newsletters.

### Bright Pink

[www.bebrightpink.org](http://www.bebrightpink.org)

Provides support for young women with breast cancer or at high risk for breast cancer.

### Cancer Wellness Center

[www.cancerwellness.org](http://www.cancerwellness.org)

1-866-292-9355

Center located in Northbrook.

Provides educational sessions, group support and family counseling.

### Fertile Hope

[www.fertilehope.org](http://www.fertilehope.org)

Provides information regarding cancer and fertility issues.

### National Alliance of Breast Cancer Organizations (NABCO)

[www.nabco.org](http://www.nabco.org)

Provides information and resources for breast cancer.

### National Cancer Institute

[www.cancer.gov](http://www.cancer.gov)

1-800-4-CANCER (1-800-422-6237)

Provides free written information on breast cancer.

### National Domestic Violence Coalition Hotline

[www.ncadv.org](http://www.ncadv.org)

1-800-799-SAFE (7233)

### National Lymphedema Network

[www.lymphnet.org](http://www.lymphnet.org)

1-800-541-3259

### Network of Strength (formerly Y-Me)

[www.networkofstrength.org](http://www.networkofstrength.org)

(website can be changed to languages below also)

24 hour hotlines

English: 1-800-221-2141

Spanish, Russian, Vietnamese, Tagalog, Korean, Chinese:

1-800-986-9505

### Sharsheret Organization

[www.sharsheret.org](http://www.sharsheret.org)

1-866-475-2774

Dedicated to assisting young Jewish woman with breast cancer.

### Share

[www.sharecancersupport.org](http://www.sharecancersupport.org)

1-866-891-2392

Support network for women with breast or ovarian cancer.

### Susan G. Komen Breast Cancer Foundation

[www.komen.org](http://www.komen.org)

1-800-IMAware (1-800-462-9273)

Updated 9/09

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## Needle or Wire Localization

You are scheduled for a needle localization procedure. This is being done to help your surgeon remove an abnormality in your breast that is so small it cannot be felt. The procedure is done by a radiologist in the mammography department. The procedure will last 30-60 minutes. Be certain to arrive at the mammography department on time. Your surgery cannot be done until this part of the procedure is completed.

**Do not wear powder or deodorant for this procedure. Once this procedure is done, you may not shower.**

Once your breast is in the proper position, it is important that you remain as still as possible. The breast will be cleaned with an antiseptic. A local anesthetic will be used to numb the skin. You will feel a small sting as the local anesthetic is injected. You may feel some pressure as the radiologist inserts the needle localizer. Some women also report feeling pressure on the opposite side of the breast during this procedure.

### **Procedure Ultrasound Placement:**

You will be placed in the same position as your previous breast ultrasound. Every effort will be taken to make certain that you are comfortable. The radiologist will be able to see the needle localizer being inserted to the breast abnormality by watching the ultrasound image.

### **Procedure Mammogram Placement:**

Several mammogram films will be taken prior to the procedure. Your breast will be in compression for longer than a normal mammogram. Every effort will be taken to make certain that you are comfortable. More films will be taken to locate the position of the needle localizer in relation to the abnormality in the breast.

Sometimes the needle localizer needs to be repositioned. If so, another film will be taken to ensure proper placement. A thin wire will then be inserted through the needle. This helps to identify the area to be removed during your surgery. The wire usually does not cause any pain once inserted.

### **After Wire Placement Procedure:**

A final set of mammograms will be taken. The wire will be taped to your breast and covered with a small dressing. Sometimes with a sentinel node biopsy procedure, a second set of needles is placed next to the wire, so that the sentinel node biopsy injection can be placed near the wire marking the non-palpable breast abnormality. The needle for the sentinel node biopsy injection is removed following the sentinel node biopsy radioisotope injection. The localization wire will be removed along with breast tissue at the time of your surgery.

**Note: It is important to let the radiologist/ technician know if you are feeling any discomfort during the procedure.**

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## Sentinel Lymph Node Biopsy for Breast Cancer Surgery

The sentinel lymph node biopsy technique has been developed to help identify those patients for whom an axillary node dissection is needed or not.

In the past, all patients diagnosed with invasive breast cancers underwent an axillary node dissection. However, the majority of patients with early stage breast cancers were found to be free of cancer in the lymph nodes.

### Axillary Node Dissection:

- Requires placement of a drain that must be cared for at home after surgery.
- Results in the need for shoulder and arm exercises after surgery to regain function.
- Removes all the nodes from under the surgical arm (usually levels one and two... and varies in the number of nodes with each person) resulting in a lifelong risk (15-20%) of arm swelling (lymphedema).

**The sentinel node biopsy technique minimizes the likelihood of developing lymphedema.**

### Procedure:

The sentinel node biopsy procedure may require an extra step either the day before surgery or the day of surgery. The patient receives either an injection of a small amount of radioactive tracer (or blue dye) around the tumor or periareolar complex. Local anesthetics are used to minimize the discomfort with the injection(s). Note: blue dye injections are done at the time of surgery.

If the radioactive tracer is used, the day of the surgery, an xray machine will be used to scan the breast to see if the tracer traveled or 'mapped' to one or more of the lymph nodes. An xray will be taken to document the lymph node(s) location. If blue dye is injected at the time of the surgery, the surgeon will massage the breast, make a small incision under the armpit and identify blue lymph node(s) or blue lymphatic vessels. Note: when the tracer/dye flows from the breast to a lymph node, it does not mean that cancer has spread to that lymph node. It means that if cancer were to have spread, it is predicted that cancer

would spread to this lymph node first. As a result, analysis of the sentinel node(s) is very important for staging and treatment of breast cancer.

### Surgery:

The surgeon uses a probe (Geiger counter), or looks for a blue lymph node, to find the sentinel nodes(s) during surgery. A small incision is made usually in the armpit area but sometimes on the breast or near the sternum, to remove the sentinel node(s). The tumor will be removed from a separate incision during the surgery. Sometimes a patient does not 'map'. If sentinel lymph node(s) cannot be located, a standard (conventional) axillary node dissection may be performed.

Sometimes the sentinel node is sent for frozen section. If the sentinel node(s) is found to have cancer on frozen section during the surgery, an axillary node dissection is usually done to remove additional lymph nodes under the arm and a drain will be placed to help promote healing of the surgical area.

**Note: if blue dye is used, the breast skin may be temporarily discolored and the patients' urine may be blue colored for the next twenty four hours.**

### Recovery After Sentinel Node Biopsy:

Patients usually return home the same day of surgery if a lumpectomy and sentinel node biopsy procedure is done. Most patients feel almost back to 'normal' within a week or so of surgery. Recovery is longer for patients who have a mastectomy with or without reconstruction since a drain(s) must be placed for this surgery.

The sentinel node procedure

- Does not require placement of a drain (as is required with an axillary node dissection).
- Rarely causes significant shoulder or arm limitation after surgery.
- Reduces the likelihood of lymphedema with sentinel node biopsy (2-3%) versus 15-20% with axillary node dissection.

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## **Sentinel Lymph Node Biopsy for Breast Cancer Surgery**

Sometimes patients develop a seroma, or fluid pocket, under the arm after the sentinel node biopsy procedure. This fluid usually goes away on its own. If it bothers you, it can be aspirated. Some patients also report temporary sensory changes (numbness, burning) under their surgical arm and experience pulling of the arm with movement. These sensations usually go away in 2-3 weeks but can persist for up to 2-3 months. Occasionally range of motion exercises are needed to regain complete shoulder function. If you are having difficulty achieving return of arm function, notify your surgeons' office.

You will need to make an appointment with your surgeon 1-2 weeks after your surgery.

Additional cancer treatment(s), if needed, usually begin 3-4 weeks after surgery.

If you have any additional questions about the sentinel node biopsy procedure, please do not hesitate to contact your nurses' line at (847) 570-1700.



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## Postoperative Drain Care Instructions

Women having breast cancer surgery may be sent home from the hospital with one or more drains. The type of drain most commonly used is called a Jackson-Pratt (or JP) drain. This drain consists of a small plastic bulb reservoir connected to a flexible drainage tube. Its purpose is to remove fluid from the wound through mild suction. The JP drain stays in place for an average of 7-14 days, and can be removed in your surgeon's office.

Carefully review these instructions on how to care for your JP drain at home. You should ask your hospital nurse to review the steps with you before discharge.

1. The tubing is sutured into place. Pulling on it may cause pain. Your nurse will show you how to secure it.
2. Check the skin around your drain and incisions for signs of infection at least twice daily, during drain care. Slight redness around the drain site is not unusual. However, a large area of redness or tenderness beyond the drain site should be reported to your surgeon.
3. Empty the JP drain bulb twice daily (in the morning and in the evening before bed). Wash your hands before and after.
4. To empty the drain, open the stopper, turn the bulb upside down, and squeeze the fluid into a measuring cup. Record the date, the time, the amount and color of the drainage on the chart provided. The fluid will be blood-tinged at first.
5. Resume suction by squeezing the bulb from the sides, and reinserting the stopper.
6. "Milk" or strip the drain tubing after emptying the fluid and reactivating the suction. This is done to prevent small clots from blocking fluid flow. The motion is similar to curling ribbon for a package. With your non-dominant hand, hold the tubing at the skin exit site to anchor it.

With your dominant hand, pinch the tubing between your thumb and a pen, applying firm pressure on the tubing from your chest area to the bulb. This should be done with the stopper closed. **DO NOT eliminate this step - it can prevent leakage around the drain site.**

7. Do not disconnect the drain from the tubing to remove clots or rinse the bulb- this increases the likelihood of infection. If the tubing and bulb become disconnected accidentally, wipe the ends with alcohol and reconnect.
8. Try to wear clothes that are easy to get on and off. Bras should be supportive if worn, but not too tight. A bra extender may help. Some women prefer stretchy front-closing sports bras.
9. Refer to your discharge instructions as to when the drain can be removed and shoulder range-of-motion exercises begun. These parameters vary from surgeon to surgeon.

### Notify Your Surgeon or Breast Center Nurse If:

- There is a large amount of leakage around the drain site.
- There is a marked increase in drain output from one day to the next (a doubling).
- There is increased redness, heat, or tenderness at your drain site or incision areas.
- You develop a fever of 100.5 degrees or higher.

Proper drain care is essential to your physical recovery. Please don't hesitate to contact your surgeon or breast center nurse if you have any questions or concerns. Your comfort and peace of mind are very important to all of us.

**Bring the Attached Drain Output Record Sheet When Your Drain Is Removed.**

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## Lymphedema Precautions

These precautions refer to the extremity on the surgical side only.

### Skin:

Monitor skin condition closely. Call your primary care physician immediately if the area at risk shows signs of infection: redness, rash, warmth, increased swelling and/or fever/chills.

- Keep extremity clean. Use regular soap and water to wash.
- Avoid dry skin. Use non-alcoholic skin cream, such as Eucerin, to moisturize.
- Avoid cuts, scrapes, and bruises. If a cut or scrape happens: wash the area with soap and water (if not available, an alcohol wipe may be used), apply antibiotic ointment or cream, use a Band-Aid, and monitor the limb for infection.
  - Avoid needle punctures or blood draws in extremity.
  - Use gloves for housework and gardening.
  - Use thimble when sewing.
  - Use a well-maintained electric razor.
  - Do not cut cuticles of fingers on at-risk extremity.
  - Avoid tattoos.
- Avoid insect bites. Use insect repellent or wear protective clothing.
- Avoid burns (from sun and cooking). Use sunscreen when outdoors and potholders when cooking.
- Avoid excessive heat. For example hot tubs, saunas, hot water pools, or using a heating pad over the affected area.

### Travelling:

- Planes:
  - Make sure to move extremity (walking every 45 minutes to one hour).
  - Avoid carrying heavy luggage on affected side.
  - Stay well hydrated. Drink plenty of water.
  - For frequent travelling, consider seeing doctor for ordering sleeve.
- Car/bus/train:
  - As above with plane travel.

- If the affected extremity is heated by sunlight through the window, place a white sheet over the extremity or wear a long-sleeved, light colored shirt. Car window shades are sometimes helpful.
- If traveling for a long period of time, it is sometimes recommended that a filled prescription of antibiotics be taken with in case of emergency. Please discuss this with your own physician.

### Exercise:

**With any new activity or when returning to a familiar activity, start slowly and monitor the affected extremity closely. Please note if you have lymphedema already, it is highly recommended that any exercise be performed wearing a compression garment or a bandage. If you do not have lymphedema, please consult your physician regarding wearing a compression garment during exercise.**

- Avoid sedentary lifestyle.
- Individuals may vary. However in general 1-5lb. weights are okay, but start with lower weights and monitor extremity for swelling. Be extra cautious regarding weight machines.
- Avoid vigorous, repetitive movement, excessive force, or strain. If you have specific questions, please ask your physician.
- Avoid prolonged gripping during exercise – change hand positions or raise arm and open and close fist often. (For example holding bicycle bars, treadmill handles, or free weights.)

### Constriction:

- Wear loose fitting clothes. Loosen bra straps (at shoulder and around waist) and avoid elastic bands that cause skin deep indentation or redness such as underwear tight pants, etc.
- Avoid wearing jewelry on surgical arm.
- Avoid measurement of blood pressure and blood draw on surgical arm.
- Avoid hanging bookbags, backpacks, grocery bags, or purses on surgical side.

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## Lymphedema Precautions

### Diet:

- Maintain an ideal body weight. Follow a low-fat, well-balanced diet.
- Avoid foods high in salt or spices.
- Avoid alcohol, caffeine, and smoking.
- Drink 8 glasses of water a day.

### Daily Activities:

- Carry light grocery bags. (approximately less than 10 lbs.)
- Pace housework over a period of days rather than one day (vacuuming, dusting, etc.).
- Use potholders for cooking and rubber gloves for dish washing and cleaning.
- If sitting for a long period of time, get up and stretch/walk at least once an hour.
- With repetitive motion (i.e. typing or knitting) stretch arms over head every half-hour.
- Lift children with unaffected arm using affected arm as support (if possible).
- Avoid carrying heavy objects with affected extremity.
- Avoid sleeping on the affected side.

### Medical Alert Bracelet

- Bracelet or necklace (for patients with arm lymphedema) may be obtained through your local pharmacist or through the National Lymphedema Network (800) 541-3259.

### OPTIONAL

- **Pink** Lymphedema Alert bracelet (pink plastic bracelet attached to handout). This bracelet may be used as needed for a hospitalization, doctor's visit, etc. Make sure to wear this bracelet loosely on your affected wrist so that you may be able to remove and reuse and most importantly not to constrict your lymphatic system. (Note: this is for patients with arm lymphedema only.) The bracelet is available through the National Lymphedema Network (800) 541-3259 or through the NorthShore University HealthSystem Lymphedema Treatment Center in Glenview (847) 486-5300.

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## Recommended Lymphedema Precautions for Travel

If you are at risk for or already have lymphedema, be sure to plan ahead and consider these helpful tips to minimize the risks of lymphedema during travel. Enjoy your trip and try to do all the things you wish while following these simple precautions. Please note that these precautions apply only to the affected or potentially affected area.

### Before your trip:

- If you use bandages or compression garments, check that your bandages or compression garments are in good condition. Take along an old one as a spare in case something happens to your good one.
- For frequent traveling, consider seeing your doctor for ordering a compression garment.
- If you obtain a sleeve, wear it for one week before your trip to build up a tolerance to the sleeve and evaluate the fit.
- It is important that any ready-made sleeve fits properly. An ill-fitting sleeve can cause swelling.
- If vaccinations are required, avoid having them in the affected extremity.
- It is sometimes recommended that a filled prescription of antibiotics be taken with you in case an infection develops. Please discuss this with your own physician.

### Luggage:

- Avoid carrying your shoulder bag on the affected shoulder.
- Avoid carrying heavy bags.
- Use the push carts at airports or porters to move luggage.
- Purchase a suitcase with wheels. When possible, use the unaffected arm to pull your suitcase.
- Consider packing two suitcases lightly rather than only one heavy one.

### Exercise:

- Keep your compression garment or compression bandage on until you arrive at your hotel or destination.
- If affected extremity is heated by sunlight through the window, place a light colored sheet over the extremity or wear a long sleeved, light colored shirt or pants. Car window shades are also helpful.
- For long car trips, stop for frequent rest stops, every hour or two, and get out of the car to walk and move around.
- For car, airplane, bus, and train travel, move around frequently and perform simple mobility exercises.
- Place small pad or pillow under elbow to avoid pressure from armrest.
- Avoid caffeine, alcohol, and salty foods.
- Stay well hydrated. Drink plenty of water.
- If you have been instructed in self-massage, these techniques can be performed while seated during travel.
- Wear loosely fitting clothing to avoid constriction.

### During your vacation:

- Regarding climate: High temperatures, heat, and humidity tend to increase the risk of lymphedema - It's best to stay cool, avoid salt, and drink plenty of water.
  - Avoid sunburn. Use a good sunscreen product when outdoors.
  - Avoid excessive heat (i.e. hot tubs, saunas, hot water pools).
  - Avoid insect bites. Use insect repellent or wear protective clothing.
  - Be aware of overdoing sports that you are not used to.
  - Keep your limb cool and well moisturized.
  - At spas, avoid deep tissue massages to the body region a risk.
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## Recommended Lymphedema Precautions for Exercise

If you are at risk for or already have lymphedema, be sure to plan ahead and consider these helpful tips to minimize the risks of lymphedema during exercise. Be more active and try to do all the things you wish while following these simple precautions. Please note that these precautions apply only to the affected or potentially affected arm. Remember that as you increase your physical activity, you should increase your intensity with lymphedema management.

### Before you exercise:

- Before starting any exercise routine ask your MD for his/her recommendations.
- If you use bandages or compression garments check that your bandages or compression garments are in good condition. If you do not have lymphedema, consult your MD regarding the appropriateness of wearing a compression garment during exercise.
- It is important that any ready-made or custom garment fits properly. An ill-fitted garment can cause swelling.
- Begin strength training no sooner than four weeks post surgery and only with the MD permission.
- If you are receiving chemotherapy or radiation therapy you may experience fatigue and decreased endurance. Do not allow yourself to become exhausted. Avoid vigorous activity on days you receive intravenous chemotherapy.

### While you exercise:

- Keep your compression garment or bandage on for the entire workout activity and through a cool down period of time, for about one hour after you exercise.
- Wear comfortable clothing to avoid constriction.
- Regarding exercise environment: high temperatures, high altitudes and changes in humidity tend to increase the risk of lymphedema. It is best to stay cool and drink plenty of water.
- Wear sunscreen and insect repellent, reapplying per directions when participating in outdoor activities.
- Avoid hanging or carrying heavy equipment on shoulder. If this is unavoidable try padding and taking more breaks with self-massage to help move fluid through these blocked areas, e.g. hiking, sky diving.

- Avoid exercise when you experience tenderness in a joint that worsens with activity
- Avoid strenuous activity during viral infections such as the flu or upper respiratory tract infections.
- Strengthening: Individual abilities may vary, however, in general, 1 – 5 lb. weights are okay to use with the following in mind:
  - Start with light weights and monitor the extremity for swelling. The affected limb's response to exercise will determine the appropriateness of intensity.
  - For example, begin with 1 pound and increase amount of weight slowly. If there is any change in size or tissue texture stop and contact your MD.
  - Be extra cautious regarding weight machines.
  - Remember to wear compression sleeve.
- Avoid vigorous repetitive movement, excessive force, or strain. If you have specific questions please ask your therapist. Perform exercises in a controlled manner.
- Avoid prolonged gripping during exercise – change hand positions or raise arm and open and close fist often. (For example holding bicycle bars, treadmill handles or free weights.)
- Stay well hydrated.

### After you exercise:

- Check the limb over the next 24 hours after starting something new in your exercise routine. For example, it can be a change in weight, repetitions, or just a new activity. Measure your limb and keep records of the girth at different points. You may have to back down and slowly increase your intensity or repetitions with the new activity.
  - Call your MD immediately if you notice any redness, swelling or heat in your affected limb.
  - Avoid deep tissue massage to the body region at risk.
  - Avoid excessive heat such as saunas, hot tubs or heating pad on the body region at risk.
  - If you have been instructed in self-massage, these techniques can be performed before and/or after you have done your exercise activity.
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**Breast Cancer Referral List**

**Medical Oncologists**

Dr. Douglas Merkel	Dr. Elaine Wade	Dr. Teresa Law
<b>Evanston</b> 2650 Ridge Avenue Evanston, IL (847) 570-2112	<b>Glenbrook</b> 2100 Pfingsten Road Glenview, IL (847) 657-5826	<b>Highland Park</b> 777 Park Avenue West Highland Park, IL (847) 480-3800

**Radiation Oncologists**

Dr. Bill Bloomer	Dr. Arif Shaikh	
Dr. Ranjeev Nanda	Dr. Vathsala Raghavan	
<b>Evanston</b> 2650 Ridge Avenue Evanston, IL (847) 570-2590	<b>Glenbrook</b> 2100 Pfingsten Road Glenview, IL (847) 657-5950	<b>Highland Park</b> 777 Park Avenue West Highland Park, IL (847) 480-3908

**Plastic Surgeons**

Dr. Mark Sisco	Dr. Michael Howard	Dr. Jeremy Warner
	501 Skokie Blvd. Northbrook, IL 60062 (847) 504-2300	

**Psychosocial Oncology Program - Social Work**

<b>Evanston</b> 2650 Ridge Avenue Evanston, IL (847) 570-2091	<b>Glenbrook</b> 2100 Pfingsten Road Glenview, IL (847) 657-5805	<b>Highland Park</b> 777 Park Avenue West Highland Park, IL (847) 480-3842
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**Physical Medicine and Rehabilitation**

Dr. Joseph Feldman	Dr. Danielle Schiff	
<b>Park Center</b> 2400 Chestnut Avenue Glenview, IL (847) 570-2066	<b>Evanston</b> 2650 Ridge Avenue Evanston, IL (847) 570-2066	<b>Highland Park</b> 777 Park Avenue West Highland Park, IL (847) 570-2066

**Integrative Medicine**

(847) 657-3540

**Lymphedema Treatment Center**

(847) 570-1132

**Medical Genetics/Counseling**

(847) 570-1029

**Physical and Occupational Therapy**

(847) 570-1250

<b>Evanston</b> 2650 Ridge Avenue Evanston, IL	<b>Glenbrook</b> 2100 Pfingsten Road Glenview, IL	<b>Highland Park</b> 777 Park Avenue West Highland Park, IL	<b>Skokie</b> 9600 Gross Point Road Skokie, IL
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## Compression Support Sleeve

**\*\*Please call ahead and schedule an appointment for fitting of the support sleeve\*\***

### **Positive Care (Highland Park)**

Inside Schwartz's  
Crossroad Shopping Center  
161 Skokie Valley Rd  
Highland Park, Illinois 60035  
(847) 251-1118  
Fax: (847) 251-1469

### **Betty Schwartz Intimate Boutique (Buffalo Grove)**

1152 E. Lake Cook Road  
Buffalo Grove, Illinois 60089  
(847) 459-5846

### **Betty Schwartz Intimate Boutique (Highland Park)**

1833 2nd Street  
Highland Park, Illinois 60035  
(847) 432-0220

### **Benchmark Atlantic (McHenry)**

5407 Bull Valley Road  
McHenry, Illinois 60050  
(815) 578-0304

### **Fairhaven Medical Supplies**

603 East Hawley Street  
Mundelein, Illinois 60060  
(847) 566-5801

### **Marks Drugs (Wheeling)**

548 W. Dundee Road  
Wheeling, Illinois 60090  
(847) 537-8500

### **Vandriel (Mount Prospect)**

720 East Northwest Highway  
Mount Prospect, Illinois 60056  
(847) 253-6494

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## Breast Prosthesis List

### **Positive Care (Highland Park)**

Inside Schwartz's  
Crossroad Shopping Center  
161 Skokie Valley Rd  
Highland Park, Illinois 60035  
(847) 251-1118  
Fax: (847) 251-1469

### **Betty Schwartz Intimate Boutique (Buffalo Grove)**

1152 E. Lake Cook Road  
Buffalo Grove, Illinois 60089  
(847) 459-5846

### **Betty Schwartz Intimate Boutique (Highland Park)**

1833 2nd Street  
Highland Park, Illinois 60035  
(847) 432-0220

### **Nordstroms (Skokie)**

77 Old Orchard Shopping Center  
Skokie, Illinois 60077  
(847) 677-2121

### **Second Act (Chicago)**

3020 N Lincoln Avenue  
Chicago, Illinois 60657  
(773) 525-222  
[www.secondactchicago.com](http://www.secondactchicago.com)

### **Intimate Healthcare (McHenry)**

5407 Bull Valley Road  
McHenry, Illinois 60050  
(815) 578-0304

### **Sheshe (Geneva)**

17 South Third Street  
Geneva, Illinois 60134  
(630) 232-0933

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