



# Helpful Hints for Dr. Appointments

1. ***Bring all of your medications*** with you or you may bring a list of your medications, please bring this list to each appointment to ensure that each of your doctors has your current information.
  - include vitamins, herbs and over-the-counter medicines *even if you may only take occasionally*
  - keep a list so you have your current medication list available at each appointment
2. ***Bring a friend or family member*** with you as this is especially important when you meet with each of the doctors on your healthcare team for the first time.
  - although you will receive most of the significant information in writing, ask the person accompanying you to write down some of this important information
3. ***Take your medications before each of your doctor appointments.***
  - eat and drink normally; although you may have some blood work drawn, there are not any tests that require fasting; you will be notified if you cannot eat or drink before an appointment or procedure
  - if you are taking pain pills, take them before meeting with a doctor, it is very difficult to learn and ask questions if you are in pain
4. ***Your doctors will want to know about your overall health.***
  - your team does share your health information, but they still will each ask you about any previous surgeries, other medical diagnoses and about any symptoms you may have, related or non-related to the breast cancer
  - keep a list of any previous surgeries, other medical diagnoses and
  - each of your doctors will do a physical examination; wear a two-piece outfit because the doctors will not ask you to undress your lower half
5. ***Be prepared to give your family history*** from both your mother and your father's families, especially if anyone in your family has had breast or ovarian cancer.
  - think about this information prior to your first doctor's appointment and write it out to keep in the *Journey* notebook
6. ***Bring a list of questions with you, if you have any.***
  - please write your questions down so you can ask them the next time you see your doctor
  - if you have additional questions after any of your appointments, call the contact person at the appropriate medical office

# Helpful Hints for Surgery



## **Before Surgery**

*It may be helpful to purchase a post-surgical bra before surgery.*

**You will be scheduled to meet with a surgeon to discuss surgery** before arranging a date for your surgery.

**You will be asked to discuss your financial arrangements** before surgery. Please note: the surgeon's office has separate finances from the hospital. Please ask about payment plans if necessary.

- Lab work or X-rays may be required and if necessary, you will receive complete instructions.
- You will need to bring a complete list of medications (prescription, vitamins, and herbs) to each appointment.
- **For seven days** prior to surgery do **NOT** take any aspirin, ibuprofen, fish oil, Aleve®, Plavin®, Coumadin or other blood thinners.
- When packing for the hospital include a loose shirt that buttons down the front to wear home after the surgery.
- Purchase a bra based on the extent of your surgery and comfort needs:
  - a sports bra
  - a stretchy-type bra or sports bra that closes in the front, fits loosely and has no under-wire
  - there are specifically designed post-surgical bras and camisoles that are made for breast surgery patients' comfort and have helpful features such as pockets to hold drains
  - post-surgical garments may be covered by your insurance.

**Some insurance companies pay for undergarments for breast surgery.** There are local retailers with these garments, and some may check for you with your insurance company if you bring your insurance card or information.

## **Immediately After Surgery**

The good news is that, unlike in years past when breast cancer patients received surgery and had to be hospitalized for many days, most patients actually recover rather quickly. Some patients go home the same day of their surgery, others require a one-or-two night stay.

- Someone must drive you home following surgery.
- You and the persons driving you and caring for you should carefully review, with the medical personnel, the discharge information sheet; do not hesitate to ask any question.
- Have someone stay with you for 24 hours after your discharge from the hospital.
- You will receive a prescription for pain medication upon discharge; take as prescribed. ***If you are given a prescription for Tylox®, Percocet® or Vicodin®, they all contain Tylenol®, called Acetaminophen (APAP) generically; please do not take any additional Tylenol® with these medications; you may take ibuprofen or naprosyn with these prescriptions, unless your doctor has given you other instructions.***



- Take your usually prescribed medications unless otherwise directed.
- Eat lightly for the first 24 hours (soup crackers, pudding), resuming your normal diet 24 hours after surgery.
- Most patients will experience, for several days, some swelling and bruising on the chest and underarms, ice packs will help.
- If you experience constipation (may be caused by pain medication) or to prevent:
  - increase your fluid intake
  - take a stool softener
  - use a mild laxative (Milk of Magnesia is recommended)
  - **if you do not have a bowel movement after 48 hours call your surgeon's office.**

Based on the type of surgery you may go home with one of these four: dermabond, sutures, staples, steri-strips (small skin tapes), and of course, bandages. You may or may not have drains. Unless your discharge instructions indicate otherwise:

- keep your bandages dry and in place until your next appointment
- all sutures or staples will be removed at the doctor's office
- steri-strips will fall off by themselves (seven to ten days), **do not pull them off**
- you may take a limited sponge bath; if you have dermabond covering your incision, you may bathe as accustomed
- if you have drains in place
  - hospital staff will explain what they are and how to take care of them
  - it is important to record the amount of drainage produced every day
  - do **NOT** take tub baths or showers until the drains are removed.

**You should call the doctor if you are experiencing:**

- |                                 |  |
|---------------------------------|--|
| 1. fever over 101 degrees       | 5. continued bleeding from incision      |
| 2. nausea or vomiting           | 6. increased pain                        |
| 3. extreme swelling or bruising | 7. redness or drainage from the incision |
| 4. inability to urinate         | 8. difficulty with drains.               |

**Follow-Up with Your Doctor:** You should see your doctor in the office for a follow-up appointment approximately three to five days after your surgery. Make sure to call for this appointment within a day or so after your surgery.

**You may drive when:**

- you can comfortably wear a seatbelt
- prescription pain medication is no longer being used
- you can safely maneuver your car and apply brakes **in an emergency situation.**

**Activities:** You may resume regular, light activities the next day – such as daily self-care, walking, climbing stairs – and gradually increase activities as tolerated. You may have sexual intercourse when it is comfortable. Refrain from any heavy lifting or straining until approved by your doctor.

**Call your surgeon if you have any questions or problems.**

# Helpful Hints for After Surgery



***Wearing a post-operative bra or a sports bra with a closure in the front*** may provide additional support that may help you feel better. Many women wear a bra at all times after surgery, even to bed.

***It is very important to stretch and resume exercising after breast surgery.***

However, when and how to resume exercising depends on the type of surgery you have, and if you have drains.

1. Drains are sometimes placed by your surgeon to prevent fluid from building up following surgery.
  - If you have drains, your doctor or nurse will give you specific information on how to care for them.
  - If you have drains in place after surgery, your surgeon will want to see you back at the surgical office in one to two weeks. Please make sure you have an appointment.
  - Unless your surgeon gives you different postoperative instructions, you may resume activities of daily living, but no heavy lifting, pulling or pushing.
  - You may gently stretch your arm and shoulder, but exercise is not advised until the drains have been removed.
  
2. If you do not have drains after surgery, your surgeon will want to see you in clinic within two-three weeks. Please make sure you have an appointment scheduled.
  - Unless your surgeon tells you differently, you may resume activities of daily living, but no heavy lifting, pulling or pushing.
  - You may also start stretching your shoulder and muscles. Please review the chapter about caring for your surgical arm in the book, "Your Breast Cancer Treatment Handbook" by Judy Kneece. There are stretching exercises to help your range of motion after surgery.
  
3. It is normal for your surgical arm to feel stiff after surgery.
  - It is very important to gradually and gently stretch your muscles and shoulder.
  - If you do not stretch, both your arm and shoulder will become stiffer.
  - If you are having difficulties or are not able to stretch, please call the nurses line at the surgeon's office. You may need to see your surgeon.
  - In some cases, if your arm is stiff or sore several weeks after surgery, a physical therapist may be the type of health care professional to help you.



# Helpful Hints for Medication

## About Medications

***If you are given a prescription for Tylox®, Percocet® or Vicodin®, they all contain Tylenol®, also called Acetaminophen (APAP) generically. Please do not take any additional Tylenol® with these medications. You may take ibuprofen, Naprosyn® or Aleve® with these prescriptions unless your doctor has given you other instructions.***

Food, alcohol, caffeine products, current prescription drugs, and nonprescription drugs could interact with newly prescribed medications.

- when you take medicine, be sure to ***follow your doctor's instructions carefully*** to obtain the maximum benefit with the least amount of risk.
- make sure ***your doctor and pharmacist know about every drug you are taking***, including nonprescription drugs and any dietary supplements such as vitamins, minerals and herbals; you may want to keep a list with you
- if you have problems or experience side effects related to your medications, call your healthcare provider right away

## Food-Drug Interactions

***Food-drug interactions can lead to:***

- speeding up or slowing down the action of a medication
- canceling out the desired effect of the medication
- alterations in how nutrients are used in the body
- stimulation or suppression of your appetite

***The impact of food-drug interactions can depend on:***

- the dosage of the drug
- the quantity and type of food taken in
- a person's age, size and state of health
- the timing of your meals and medication

***Food and beverages can interact with your medications:***

- certain medications should be taken on an empty stomach while others should be taken with food to minimize stomach irritation
- a medication's effectiveness can be enhanced or decreased when eating certain foods

***Alcohol (when taking with or while on medications):***

- can increase drowsiness and cause problems with perception
- may increase the risk of liver damage/stomach bleeding

***Caffeine (chocolate, cola, coffee, and tea):***

- can act as a stimulant and increase central nervous system activity

***Herbals, vitamins, supplements***

(green tea, St. John's Wort, melatonin, coenzyme10, ginseng, fish oil, etc.):

- can interact with prescription drugs



## Drug- Drug Interactions

### *Use Medications Safely*

Drug-drug interactions occur when two or more drugs react with each other. This interaction may lead you to experience unexpected side effects, make your drug or drugs less effective, or increase the action of a particular drug. Always ask your pharmacist about drug-drug interactions and always carry a list of your medications with you when you are visiting your physician or pharmacist so they may review it.

### *Be Responsible for Your Health*

1. Every time that you visit your doctor's office take a medication list along.
2. If you receive a new prescription, have your pharmacist check to make sure that there are no interactions with your other medications. Always ask:
  - how does this drug work;
  - does this interact with my other medications;
  - are there any possible drug-drug interaction signs that I should know about;
  - what ingredients are contained in this medication and in the other medications that I'm taking;
  - does this replace anything else I was taking?
3. Ask for a drug information sheet or the manufacturer's package insert to learn more about your medication and any potential drug-drug interactions.
4. Discuss any over-the-counter (OTC) medications, dietary supplements, vitamins, minerals, or herbal supplements that you are currently taking or are planning to take. This is very important to report. Over the counter medications can interact with prescription medications.
5. Prescription medications can interact with OTC medications; *for example*, aspirin can increase the effect of blood thinning drugs and increase the risk for bleeding.
6. OTC medications can interact with each other; *for example*, a cough medication that contains alcohol can interact with an antihistamine (a drug that relieves hay fever symptoms such as runny nose, sneezing, and watery eyes) but increases drowsiness and alertness.
7. When buying an OTC medication, ***always read the label carefully*** and take the medication as directed. Labeling contains information such as:
  - active ingredients
  - uses
  - warnings
  - directions for use

### *Beware of herbal products:*

Herbal manufacturers are ***NOT*** required to test their products in the same manner that the FDA requires for prescription and OTC drugs; as a result, the concentration, strength, purity and quality of an herbal product can vary and lead to potentially serious drug interactions.



# Helpful Hints for Chemotherapy

Everybody's experience with chemotherapy is different. There are more than 15 types of breast cancer and therefore many different treatments and combinations of treatments. If you and your doctor decide that chemotherapy will be part of your treatment, your progress will be watched and evaluated very closely during this time. Be sure and get the contact number for answers to your questions and help with any side effects.

## **About Chemotherapy**

You will discuss with your doctor if chemotherapy will be a part of your treatment; many patients with breast cancer do not have chemotherapy. Your doctor will recommend the type of chemotherapy most appropriate for your situation. With the availability of new medications, feeling ill from chemotherapy happens less and some patients feel well enough to continue working.

Hair loss can be a side effect of some chemotherapy treatments but not with all of them. A few chemotherapy treatments may cause changes in your nails or skin. Please discuss this with your nurses, physicians' assistants, or doctor.

It is important that you feel comfortable with your treatment plan. Check with your hospital or clinic about ***chemotherapy treatment classes and tours of the chemotherapy area***. If these are offered, we strongly recommend you bring someone with you to this class and we encourage you to ask questions.

## **Chemotherapy Schedule**

Your many appointments are to monitor you closely, prevent possible side effects, and address any issues you may have. Your doctor works very closely with the Physical Assistant (PA), or Nurse Practitioner, who is skilled and knowledgeable about managing you through chemotherapy. Your doctor and their PA discuss all of your care and issues. Patients and their treatment are very different. Your doctor will recommend the number of chemotherapy treatments you will have and how often you will receive the treatments.

- Before each chemotherapy session, you will have a lab appointment to draw blood.
- Just prior to each chemotherapy treatment, you will see a physician or their PA.
- Chemotherapy treatment is given over a period of two to six hours.
- The day after chemotherapy some patients may need to come in for an injection that will prevent some of the chemotherapy side effects.

***All of the doctors, nurses, physicians' assistants, and nurse practitioners  
are experts at helping you with your treatments.***



## Before Your First Chemotherapy Treatment

- ***If you are pre-menopausal you will discuss fertility issues with your doctor. It is important to prevent pregnancy while undergoing chemotherapy.*** See your gynecologist and begin birth control if you are of childbearing age. This is extremely important because chemotherapy can stop your menstrual cycle. However, you may still ovulate and become pregnant. Tell your doctor, PA, or nurse if you think you may be pregnant at any time during your treatments. If you do not have a gynecologist, talk to your doctor or PA.
- ***In most hospitals and clinics children under the age of twelve are not permitted*** in the chemotherapy room. We realize that this may be an inconvenience for you, but this policy is in the best interest of both the patients and the children.
- ***Plan to have a friend or family member come with you during your first appointment.*** We do not know how you will react to your first treatment, and sometimes medications can make you feel sleepy and unable to drive. ***If you do not have a ride home***, let someone at the hospital know before your first visit.
- ***Please fill all of the prescriptions that your doctor gave you before your first chemotherapy appointment.*** Some of these medications may not be regularly stocked by your pharmacy and may have to be ordered.
- ***DO NOT take your anti-nausea pills before treatment unless instructed to do so by your nurse or doctor.*** The chemotherapy nurse may give you medications in your IV before you receive chemotherapy. Ask your chemotherapy nurse when to take anti-nausea medications.
- ***Eat before you come.*** Most people experience less nausea if they have some food in their system before treatment. Before your treatment – and for the first few days afterward – you should eat small, simple meals. Avoid greasy, fatty, or spicy food. This is a time to eat very easily digestible foods. Some suggestions are: toast, bread, crackers, potatoes, rice, grits, or muffins. It is important to eat small meals throughout the day, even if you do not feel very hungry. After a few treatments, you will discover the type of food that helps you feel better after treatment.
- ***DRINK, DRINK, DRINK, and drink some more AFTER chemotherapy!*** Even if you do not feel thirsty, it is important to stay well hydrated. You do not have to drink only water – sports drinks, decaffeinated soft drinks and teas are options. Avoid alcoholic beverages. Limit your caffeine intake on the day of chemotherapy and the first few days following treatment – only have one or two servings of caffeinated beverages.
- ***Bring something to do during your chemotherapy treatments*** because it is given over a period of two to six hours. Having something to do can help the time to pass quickly. Some items that others have brought include magazines, books, cards, knitting or craft items, and paper to write letters or journal entries, crossword puzzles or laptops.
- ***Dress comfortably in loose-fitting clothes and bring a sweater/zipper sweatshirt.*** Wear a shirt that buttons down the front so that the nurse can access your port-catheter (port), if you have one. If you do not have a port, wear a short-sleeved shirt so the nurse can start an IV line in your arm.
- ***Your immune system may not be functioning at its best*** and you may be more vulnerable to illness from people and from food. Be extra careful, wash all fruits and vegetables well and cook all meats and eggs thoroughly. Avoid salad bars, buffets, potlucks and any food that has been left out too long. When in doubt, **THROW IT OUT!**



### **After Chemotherapy Treatment**

- *If you are vomiting for more than 12 hours after you receive chemotherapy, please call the clinic and talk to a nurse or if it is after hours, call the on-call physician. Have a pharmacy number available. There are many medications that can be given to stop nausea and vomiting. We want you to feel the best that you can throughout treatment.*
- If you have questions or problems after your chemotherapy treatment, please call your Nurse Triage Line. They will follow your progress very closely during this time. They are always available to answer questions and to help you with any side effects.

### **About the Chemotherapy Port-catheter (port)**

Depending on the type of chemotherapy your doctor recommends, he or she may suggest a port. A port is an IV line that is placed by either your surgeon or an interventional radiologist to provide easy access to your blood system into which the chemotherapy treatment is given.

If your doctor thinks that you need a port, more information will be given to you. The appointment for the placement of the chemotherapy port will be scheduled for you. You may also call if you have more questions.

### **About Chemotherapy Induced Hair Loss**

For some women with breast cancer, hair loss can be a side effect of some treatments for breast cancer. ***Not all women*** have treatments that cause hair loss. Please talk to your medical oncologist or health care team **BEFORE** you purchase anything for hair loss, because not all treatments have that effect.



# Helpful Hints for Nutrition



*Nutritious eating habits* are always vital for your body to work at its best. Good nutrition is extremely important when you are going through cancer treatments. People who eat a healthy balanced diet through out their treatment will tolerate the side effect, better, have more strength, energy, and feel better.

*Nutrition is important* to help prevent tissue breakdown and rebuild healthy cells that cancer treatments may harm. If you are not eating enough food, or the right types, your body uses stored nutrients as a source of energy. This may result in your natural defenses becoming weaker and your body may not be able to fight infections as well.

***Eat a healthy balanced diet of:***

- complex carbohydrates
- lean proteins
- fruits and vegetables.

When you are healthy, eating enough food is often not a problem. However, when you are dealing with cancer and treatment, this can be a challenge. At times, your diet may need to include extra milk, cheese, and eggs. Make sure you are eating adequate protein from sources such as:

- fish
- chicken
- lean meat
- beans
- nuts
- dairy products

***Fluids are very important; drink at least 64 oz of fluid per day.***

Avoid greasy, fatty, or spicy food. This is a time to eat very easily digestible foods. It is important to eat small meals throughout the day, even if you do not feel very hungry.

Your immune system may not be functioning at its best and you may be more vulnerable to illness from people and from food. Be extra careful, wash all fruits and vegetables well, and cook all meats and eggs thoroughly. Avoid salad bars, buffets, potlucks and any food that has been left out too long. When in doubt, **THROW IT OUT!**

If your cancer is estrogen positive, you can still eat soy foods, but do so in moderation. Make certain you are not consuming any supplements or protein bars with soy protein. Research on the phytoestrogens in soy is still ongoing. These phytoestrogens may prove to be beneficial or may need to be limited due to their possible effects on cancer cells.

***Resources on Nutrition and Cancer:***

The American Institute for Cancer Research answers questions about diet, nutrition, and cancer through its "Nutrition Hotline" phone and e-mail service.

toll-free: 1-800-843-8114  
e-mail: [aicrweb@aicr.org](mailto:aicrweb@aicr.org)  
online: <http://www.aicr.org>



# Helpful Hints for Radiation

## Radiation Therapy

Some people with breast cancer need radiation and some people do not. You will most likely meet with a radiation oncologist who will explain whether or not radiation is necessary in your specific situation. In general, if you have had a lumpectomy, you may need radiation. If you have a mastectomy, radiation is not given in some instances, but in others, radiation is very important.

## About Radiation

During your first consultation with a radiation oncologist, no radiation is given. This appointment is for you to meet your doctor, and for your doctor to get to know you so he or she can recommend the best treatment for you. The doctors will explain the suggested treatment and the possible side effects for your specific situation.

## Planning Session

If you and your doctor decide that radiation will be part of your treatment plan, you will have to have a simulation or treatment planning session. You will have a CT scan for treatment planning purposes only. You will have a special mold made for you to lie in each time you come in for treatment. The radiation therapists will make marks on your skin that will be used to line-up the radiation machine each time you are treated. They will also place small permanent tattoos on your skin about the size of a freckle.

## Radiation Treatments

- **During the first week of treatment, you will meet with your radiation nurse who will review possible side effects** and give you tips on what you can do to prevent and/or minimize them. The nurses will be happy to answer any questions that you may have.
- **One of the most common side effects of breast or chest wall radiation can be skin irritation.** It is hard to predict how red a patient's skin may become during radiation treatment. Some have a slight redness, others can have a more severe reaction.
  - The radiation nurse will give you lotion that has been approved by your doctors.
  - Please **DO NOT** apply this lotion within four hours of your radiation treatment.
  - If your skin becomes uncomfortable, please ask to see your nurse or doctor because there are other lotions and treatments that can be used to help reduce discomfort and heal the area.
- **Fatigue is another side effect that many people going through radiation can experience.** However, each person responds differently to treatment.
  - You will be seen weekly by your nurse and doctor to make sure that your side effects are appropriate for the amount of radiation you have had.
  - Walking or light exercise may help with radiation fatigue. However, strenuous exercise is not recommended.
  - Taking rest breaks when you are able can also be helpful.



- **Radiation treatment schedules can vary** and if daily may last for 4-8 weeks. Your doctor will tell you exactly how many treatments are recommended for your specific situation.
- **The daily treatments are very short.** The actual radiation treatment itself only takes a few minutes and the appointment time will be approximately 30 minutes. A radiation therapist will help you get on the table, and they will position you in treatment position.
- **Please know that the radiation treatments themselves are very easy.** You will not feel the radiation at all. It is very similar to having an x-ray. The therapist will help position you on the radiation table everyday. The therapist can see you on a monitor and hear you on an intercom during the treatment, so you are perfectly safe.
- **If there are multiple treatment machines and therapists, the same radiation therapists will usually treat you on the same machine.** On occasion, you may have to be treated on another machine, but know that your treatment information is transferred to that machine for your treatment.
- **You may meet once a week with your nurse and your radiation oncologist** and this appointment will take longer. During this visit, your doctor will assess you for any possible side effects and monitor your progress. This appointment is a good time for questions if you have any.
- **If you have questions or problems during treatment,** there is always a radiation therapist, radiation oncologist, or radiation nurse available to help you.

*If you have any questions about radiation treatments, call the hospital or clinic and ask to talk to a radiation nurse.*

