



Sentinel Lymph Node Biopsy Patient Information Booklet

Date of Surgery _____

Please bring this booklet with you on the day of surgery

Sentinel Lymph Node Biopsy (SLNB)

This surgical procedure is done to help determine if breast cancer has spread beyond the breast tumour site, and may be done as part of your treatment.

Sentinel lymph nodes are active nodes in the lymphatic system and are removed and checked to see if they contain cancer cells. There can be more than one sentinel node.

By testing the sentinel nodes you and your doctors can decide what the next steps of treatment are.

Day of surgery

- **Do NOT eat or drink anything the day of surgery**
- **Do take your usual morning medications unless told otherwise by the anaesthetist or surgeon**
- **Do remove ALL jewelry, including all rings prior to coming to the hospital**
- **Do arrange a ride home and for someone to stay the night with you**

Where do I go when I get to the hospital?

1. Patient Registration

On the day of surgery, you will arrive at Patient Registration on level 3 of the Hastings Wing to confirm your arrival. Remember to have your health card with you.

After registering, you will take an elevator down to the Same Day Surgery (SDS) Unit which is located on level 1 of the Quinte Tower.

2. Same Day Surgery

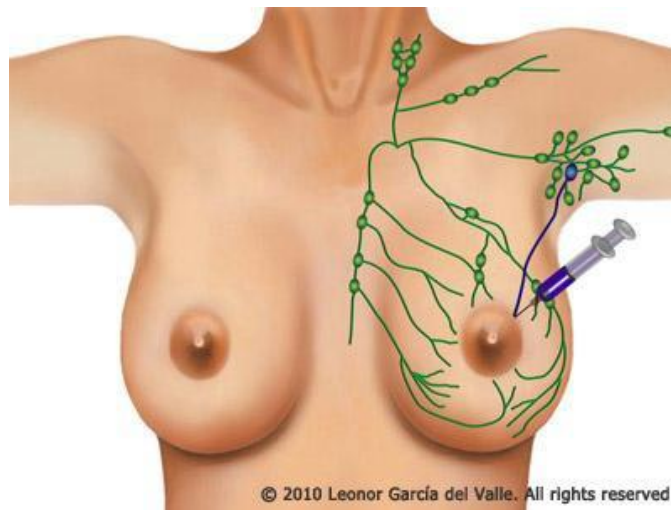
You may be asked to wait in the waiting area of SDS or be taken in at the time of your arrival. In the SDS unit, a nurse will ask you to change into a hospital gown and prepare you for your appointment in nuclear medicine.

After the nurse has you ready a porter will take you in an elevator to the nuclear medicine department.

**Note: If you are having a wire guided lumpectomy with sentinel node biopsy you will go to the diagnostic department to have the wire inserted into the breast lump with the aid of ultrasound, mammography or CAT scan usually before going to nuclear medicine.*

3. Nuclear Medicine

In nuclear medicine a small dose of radioactive agent called a tracer is injected into the breast next to the nipple. The tracer travels from the tumor site to the first node in the lymphatic system, called the sentinel node.



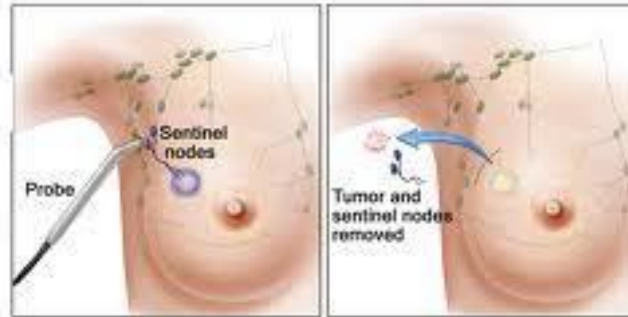
In nuclear medicine pictures will be taken over a period of time to find the area that the tracer has travelled to. These pictures will go with you to the operating room. Before you go to the Operating Room (O.R.), you will return to the SDS Unit for final preparation for your surgery. A porter will take you to the O.R. (Sometimes patients receive the radioactive tracer injection the day before surgery and then go home and return the next day for surgery. If this happens, you will skip this step the day of surgery.)

4. The Operating Room

When you arrive at the Operating Room, you will speak with a nurse and your anesthetist. Both will review questions about your health history, medications, allergies and the surgery that you are scheduled for. Shortly after you enter the operating room, a safety checklist will be completed with

your participation. The team will ask you to state your name, allergies and surgery that you are having. You will be hooked up to some monitors that will help the anesthetist during your surgery.

After you have received your anesthetic, you may have an injection of blue dye in the breast which will cause some staining on the skin afterwards. The dye and a radioactive counter help locate the sentinel lymph nodes. ***Note: the staining on the skin caused by the blue dye can last for many months.*



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When your surgery is done, you will be taken to the Post Anesthetic Care Unit (PACU) to wake up from your anesthetic. You will be discharge home when you are ready, after about 2 hours. If you require overnight care in the hospital, you will go to the surgical unit on Quinte 6.

Everyone's goal is to provide you with safe, compassionate care throughout your experience. We hope that you will share your experience with us afterwards so that we can continue to improve the way we provide care.

What to do and expect after surgery

Medications

- Pain medication as prescribed by your doctor
- Resume routine medications unless instructed otherwise.

Diet

- Resume regular diet as tolerated
- Continue with usual fluid intake, ideally 6-8 glasses of water per day.

Activities

- **DO NOT** drive or operate dangerous machinery for 24 hours after surgery.
- Avoid vigorous activity or lifting heavy objects as per your surgeon...
- If you tub bathe, **DO NOT** immerse the incision in water until fully healed.

Special Instructions

- Keep steri-strips (small tapes that are across the incision) on for 10 to 14 days unless otherwise instructed by your doctor.
- Wear a supportive bra for 5 to 7 days and nights to prevent tension on the stitches and promote comfort.

Expected Reactions

- Some swelling and discomfort
- Small amount of drainage
- Bruising in your breast
- Green urine for 24 hours or so (if blue dye was injected)
- Overall skin discolouration for 24 – 36 hours

Call your doctor's office to make a follow up appointment.

Call your doctor's office if you develop:

- **Fever or redness around the incision site**
- **An increase in wound drainage or foul smelling drainage**
- **Nausea or vomiting beyond 24 hours after your anesthetic**

Reliable Websites

The National Cancer Institute at
<http://www.cancer.gov/cancertopics/types/breast>

Susan G. Komen for the Cure at
<http://ww5.komen.org/>

The National Comprehensive Cancer Network at
<http://www.nccn.org/index.asp>

Cancer Care Ontario
<https://www.cancercare.on.ca>

Cancer.Net at
<http://www.thewellnesscommunity.org>

The Breast Cancer Network of Strength at
<http://www.y-me.org/index.php>

Live Strong at
<http://www.livestrong.org/>

References

<http://www.surgery.usc.edu/uppergi-general/breastcenter-surgery-postopcare-biopsylumpectomysentinelnodebiopsy-nodrain.html>