

## MSQC Outpatient Mastectomy Care Pathway

<b>PreOp</b>	<b>Patient Education/Prehabilitation</b> -Preadmission education about postoperative expectation (i.e., multimodal pain management, opioid-free surgery, incision and drain care) -Presurgical education about breast reconstruction -Nutrition assessment and counseling -Functional status and exercise guidance -Opioid use assessment and pain management -Tobacco cessation discussion (if applicable)	<b>Preoperative Planning</b> -Anticipate discharge needs/care coordination -Consult plastic surgery for reconstruction	<b>Labs</b> -Consider labs for patients based on ASA class	<b>Shower</b> -Shower with soap or antiseptic agent on at least the night before surgery
<b>Immediate PreOp</b>	<b>Prevention of PONV</b> -Administer more than <b>two</b> antiemetic agents. Examples: -Scopolamine patch applied at least 2 hours before induction -Dexamethasone 4-8mg IV after induction -Ondansetron 4mg IV at the end of case	<b>Multimodal Analgesia</b> -Administer $\geq 2$ non-opioid analgesia strategies -Review pain management plan before anesthesia induction <b>Examples:</b> -Acetaminophen -Gabapentin -Celecoxib		<b>Appropriate IV Prophylactic Antibiotics</b> -MSQC Recommendation: Cefazolin 2g IV for patients <120kg Cefazolin 3g IV for patients $\geq 120$ kg
<b>IntraOp</b>	<b>Multimodal Analgesia</b> -Administer $\geq 2$ non-opioid analgesia strategies <b>Examples:</b> -IV Lidocaine -Local wound infiltration with long-acting anesthetic at surgical site if no preoperative regional block	<b>Normothermia</b> -Maintain body temperature of $> 96.8^{\circ}\text{F}$ ( $36^{\circ}\text{C}$ )	<b>Avoid Urinary Catheter</b> -Avoid urinary catheter placement if possible -If needed remove catheter at end of case	<b>Alcohol-based Skin Preparation</b> -CHG Alcohol-based prep unless contraindicated (ex. Chloraprep)
<b>PostOp</b>	<b>Multimodal Analgesia</b> -Use opioids for breakthrough pain only -Schedule non-opioid analgesics instead of PRN for first 72 hours: Alternate acetaminophen 650mg with ibuprofen 600mg every 3 hours with 6 hours between dosing of acetaminophen and ibuprofen Other examples: -Gabapentin (use with caution with age $>60$ ) -Ketorolac	<b>Patient Education</b> -Discharge planning -Encourage clinic contact before presenting to ED -Wound/Drain care -Pain control -Intermittent straight catheterization if needed	<b>Discharge Planning</b> -Discharge opioid prescription according to M-OPEN recommendations, or opioid-free: <a href="https://opioidprescribing.info/">https://opioidprescribing.info/</a> -Outpatient mastectomy when indicated	
<b>Post Discharge</b>	<b>Follow Up Calls</b> -Contact patient within 72 hours of discharge for phone assessment -Follow up call at 7 days		<b>Resources:</b> -Brindle M, Nelson G, Lobo DN, Ljungqvist O, Gustafsson UO. Recommendations from the ERAS® Society for standards for the development of enhanced recovery after surgery guidelines. <i>BJS Open</i> . 2020 Feb;4(1):157-163. <a href="https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6996628/">https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6996628/</a> -Ellsworth BL, Settecerri DJ, Mott NM, Vastardis A, Hider AM, Thompson J, Dossett LA, Hughes TM. Surgeon Perspectives on Determinants of Same-Day Mastectomy: A Roadmap for Implementing Change. <i>Ann Surg Oncol</i> . 2023 Mar;30(3):1712-1720. <a href="https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9762864/">https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9762864/</a> -Jogerst, K., Thomas, O., Kosiorek, H.E. et al. Same-Day Discharge After Mastectomy: Breast Cancer Surgery in the Era of ERAS®. <i>Ann Surg Oncol</i> 27, 3436–3445 (2020). <a href="https://link.springer.com/article/10.1245/s10434-020-08386-w">https://link.springer.com/article/10.1245/s10434-020-08386-w</a> -Michigan- OPEN. Opioid Prescribing. <a href="https://michigan-open.org/prescribing-recommendations/">https://michigan-open.org/prescribing-recommendations/</a>	

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**Resources:**  
 -Brindle M, Nelson G, Lobo DN, Ljungqvist O, Gustafsson UO. Recommendations from the ERAS® Society for standards for the development of enhanced recovery after surgery guidelines. *BJS Open*. 2020 Feb;4(1):157-163. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6996628/>  
 -Ellsworth BL, Settecerri DJ, Mott NM, Vastardis A, Hider AM, Thompson J, Dossett LA, Hughes TM. Surgeon Perspectives on Determinants of Same-Day Mastectomy: A Roadmap for Implementing Change. *Ann Surg Oncol*. 2023 Mar;30(3):1712-1720. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9762864/>  
 -Jogerst, K., Thomas, O., Kosiorek, H.E. et al. Same-Day Discharge After Mastectomy: Breast Cancer Surgery in the Era of ERAS®. *Ann Surg Oncol* 27, 3436–3445 (2020). <https://link.springer.com/article/10.1245/s10434-020-08386-w>  
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