**Breast Center Clinical Path** - major plans for medical and nursing care during your hospitalization -

Patient's name:

Ward ( ) S International Hospital

Primary physician: Primary nurse:				Ward ( ), S International Hospital			
Progress	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	
	On admission	On surgery	1Day after surgery	2Day after surgery	3Day after surgery	, ,	
Treatment Medication (IV, oral )	You can take a sleeping pill as needed.	<ul> <li>Insertion of IV (other arm from the surgery side): This will be done in the operation room if your surgery is scheduled in the first surgsry of the day, otherwise in the patient's room.</li> <li>Antibiotics will be given</li> <li>Pain medication will be used as needed (IV, suppository, etc.)</li> </ul>	medications.	ed. u will take oral pain	You will take oral needed.	pain medications as	
Measure	Your surgical site of breast will be marked with a marker.	<ul> <li>After surgery, oxygen will be given. Please take a deep breath occasionally.</li> <li>One or more drains may be placed at your surgical site. Nurse will record volume of drainage per day.</li> </ul>	discharge.	will be protected w moved at the ou be removed when d	Itpatient follow-up	visit after your s less than 50cc/day.	
Examination							
Activity	No limitation	Bed rest after surgery You may change your position or sit up on your bed.	<ul> <li>No limitation</li> <li>When you walk for the first time, a nurse will help you.</li> <li>While you have drain(s), you will not have any active rehabilitation of arm and shoulder (we will instruct you as needed).</li> </ul>				
Diet	You cannot eat anything from 21:00, and cannot eat and drink from midnight on the nght before surgery.	your mouth or gargle. You may take liquid 6 hours after recovery from anesthesia.	Diet will start from t				
Hygiene	Please complete your shower and shampoo before surgery.	Before surgery, you will be requested to change into special underwear and gown for surgery and wear elastic stockings. You will be requested to keep wearing the special gown for the entire day.	sponge bath from	water-proof, and vo	tected with a transp ou can shower from	arent dressing that is in the next day when	
Toilet	After hospital admission, please record your urination frequency.	<ul> <li>Please measure and record your urine volume as soon as you wake up in the moming.</li> <li>After anesthesia, urinary cathter will be inserted.</li> </ul>	urinary catheter	Please record the	e urination frequen	су.	
Orientation	<ul> <li>You will be explained about the facility / hospitalization / events before and after surgery.</li> <li>The anesthetist and OR nurse will visit you to explain about anesthesia and events during surgery for you.</li> <li>You will be requested to submit written consent for surgery and anesthesia.</li> <li>You will be asked your medical history, taken body temperature and confirmed your current medications.</li> </ul>	Immediately after the completion of surgery, the surgeon will explain about your surgery to your family.	<ul> <li>after surgery. We treatment plan at yo</li> <li>You will be explained daily life by a nurse</li> <li>You will be explained handouts.</li> </ul>	<ul> <li>will review with your first follow-up vied about the post-suif indicated.</li> <li>if indicated also about post</li> <li>we will arrange a visit</li> </ul>	you about the res sit after your discha urgery rehabilitation st-discharge life an ing volunteer (someti	ults and our future arge. n and instructions in nd instructions with mes on the outpatient	

Disease name: **Breast mass** (mastectomy+axillary lymph node dissection)

Note 1 The disease name and others are those conceivable at the present time point and may be changed in the progress of examinations, etc. hereafter. Note 2 The duration of hospitalization is the one predicted at the present time point.