



Breast Surgery

Date of Surgery: _____

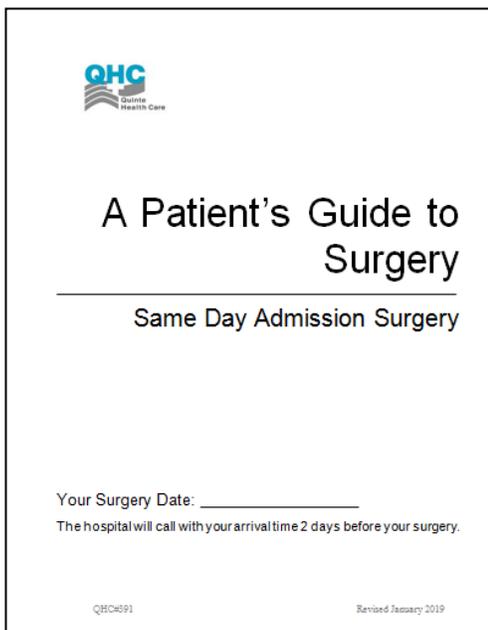
Please bring this booklet on the day of your surgery.

Purpose of this Booklet

This booklet has been designed as a resource for patients undergoing **breast surgery**. It has been created by the surgical team, including your general surgeon, nurses, and anaesthetist. This booklet has been made to help you know what is going to happen before, during and after your breast surgery.

Please read this entire booklet carefully and share this information with your family. Feel free to take notes anywhere in these pages and ask questions about anything you do not understand. This information is for general education purposes; please contact your surgeon if you have specific questions about your care.

This booklet **must be read along with ‘A Patient’s Guide to Surgery’ Booklet**. This



booklet has general information that is relevant to all patients having surgery at Quinte Health Care and must be given to you by your surgeon’s office. It is also available online at <http://www.qhc.on.ca/surgery.php>

The ‘**A Patient’s Guide to Surgery’ Booklet** covers the following items:

1. How to Prepare for Your Surgery: things to tell your surgeon, pre-surgical testing, and important information for your safety.
2. Your Day of Surgery: what to bring, your arrival, and what to expect in hospital.
3. Recovering from Your Surgery. This includes the recovery room, your admission to hospital, visitors, and pain medications.

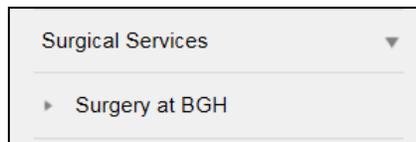
Your ‘**Breast Surgery**’ Booklet shares information that is particularly important if you are having this surgery. It includes:

1. Information on Breast Surgery and the different procedures
2. A description of your Day of Surgery and After Surgery in hospital
3. Guidelines from Home, including what to expect, signs and symptoms and important information on when to call your surgeon or come to hospital.
4. Tips for your Ongoing Recovery and Emotional Support resources

You can also get information online at: <http://www.qhc.on.ca>

Click on: **Services & Clinics**
This is in the header at the top of the website.

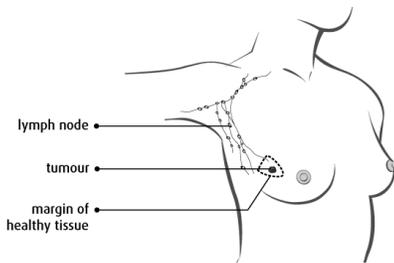
On the left-hand menu select:



You can watch instructional videos and scroll down to open Breast Surgery specific information.

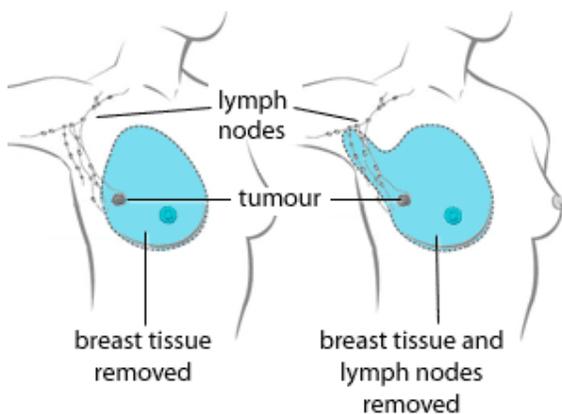
Surgery for Breast Cancer & Breast Disease

Breast surgery involves the removal of breast tissue. There are two different types of breast surgery: breast-conserving surgery and mastectomy. The type of surgery you need is determined after careful assessment and discussion between you and your surgeon.



Breast Conserving Surgery (sometimes called: ‘lumpectomy’, ‘partial’ or ‘segmental mastectomy’) – removal of the tumour and some of the tissue around it so that you keep or conserve as much of your breast as possible. Sometimes lymph nodes are removed as part of this procedure.

There are two main types of mastectomy:



Simple Mastectomy (sometimes called ‘total mastectomy’ – removal of the entire breast including the nipple

Modified Radical Mastectomy – removal of the entire breast, including the nipple and some of the lymph nodes in the armpit (axillary nodes)

If axillary nodes (lymph nodes) are removed, your doctor can gather important information on if the nodes contain cancer cells. This will help to determine the right treatment for you after surgery.

Checking Lymph Nodes

Axillary Lymph Node Dissection – during your surgery, a central portion of lymph nodes will be removed from your armpit.

Sentinel Lymph Node Biopsy – during surgery your surgeon will remove several lymph nodes to check for cancer. This procedure has a lower risk of side effects like arm swelling, can be less painful and usually doesn’t require a surgical drain.

How it works:

- The day of surgery, a small amount of radioactive liquid and a blue dye is injected into your breast. Once absorbed, the dye turns your active lymph nodes blue.
- During surgery, your lymph nodes are scanned for a radioactive signal. The lymph nodes that become blue or radioactive are known as the ‘sentinel nodes’. These are removed and sent to the lab to be checked for cancer.

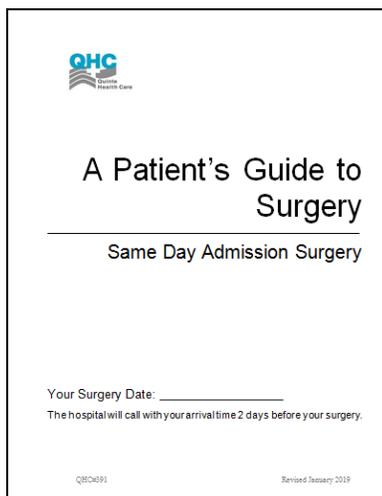
Wire Guided Localization

Not all breast surgeries involve wire guided localization – your surgeon will discuss this with you if it is part of your surgery.

A wire localization may be done to help your surgeon locate the area of breast tissue that needs to be removed during your surgery.

- On the morning of your surgery, a radiologist (doctor) will take pictures of your breast using the mammogram or ultrasound.
- They will first freeze, and then will then insert a very thin wire into the breast to mark the exact location of your tumour. This wire will stick out of your skin, but you will have a bandage placed over it so you can't see it or move it.
- During surgery, your surgeon follows this wire as a guide to the tumour. The wire will be removed with the area of breast tissue.

Preparing for your Surgery



In order to prepare for your surgery, please review your “Patient’s Guide to Surgery” Booklet. It contains information about:

- What to tell your surgeon
- Your Pre-Surgical Assessment Appointment
- Information that is **important for your safety**
- How to prevent infection and blood clots
- What to bring on the day of surgery
- Parking instructions and directions
- Where to go and what to expect in hospital

Pre-Surgical Assessment Appointment

Before your surgery, you will have a Pre-Surgical Assessment Appointment either in person or by phone. If your appointment is by phone, you will be invited to come to the hospital to meet with a nurse before you surgery. At this appointment the nurse will:

- Show you where you will need to go on the morning of your surgery
- Describe what will happen in the Operating Room and Recovery Unit
- Give you hands-on explanation of how to care for your drain and incision
- Show you the dressing materials that will be used following your surgery
- Give you a one-on-one opportunity to discuss any questions or concerns you may have.

If you are in need of interpretation services please coordinate this with your surgeon’s office.

Day of Surgery

Before you come to hospital remove all rings and jewelry and keep them at home.

Please arrive at the hospital to be registered at your scheduled time.

Because your surgery is side-specific (left or right breast) your surgeon will mark the correct side with their initials. **At this time your job is to verbally confirm with them which side your surgery is on.** This is an important safety protocol—please ask your surgeon or nurse if you have any questions.

After admission and preparation for surgery by the nursing staff, you will go to the Operating Room. At this point the surgical team performs a Surgical Safety Checklist during which they ask you to state your name, birthdate, any allergies and the procedure being done. Following this the Anaesthetist will administer an anaesthetic through your intravenous (IV) line. The most common type of anaesthesia for mastectomy surgery is general anaesthesia (which will put you to sleep). The length of surgery may vary depending on your procedure.

After Surgery

You will remain in the Recovery Room for 1-2 hours while recovery from anaesthesia is monitored. Patients often return from surgery with a variety of tubes. You may have a drainage tube coming from your incision and will be receiving fluids and medication through the intravenous (IV) line that was inserted before surgery.

If you are staying the night, you will be taken to your hospital room or to the Short Stay Unit. If you are going home that day, you will be prepared to return home from this area. Have someone available to stay with you for a few days to help you as needed.

Pain & Numbness

It is normal to have discomfort/pain after your surgery. You may have some bruising and tenderness in the area of your operation, including your armpit if lymph nodes were removed. Your surgeon will recommend a number of ways to decrease your pain including prescribing pain medication. It is important to keep your pain under control, to a level that allows you to do the things you need to do to heal (for example: sleep and the coughing activities described on the next page). Please let your nurse know if you are uncomfortable.

You may experience some numbness and tingling sensations across your incision, in your armpit, or in your upper arm. Feelings of tightness, heaviness, or burning are also common. These symptoms are normal and should decrease with time. Gently rubbing or tapping the area can help lessen these symptoms.

Diet

After surgery, you may have nausea and/or vomiting. Anti-nausea medication may be given to help control this. You will be able to increase your diet as you begin to feel better, starting with ice chips and clear fluids to a diet as tolerated.

Activity

Deep breathing and coughing are important activities to help your lungs recover after surgery. These exercises can help prevent lung congestion and pneumonia.

- Take a slow deep breath in through your nose, filling your chest and stomach like a balloon.
- Try to hold your breath for 1 to 2 seconds.
- Slowly blow out through your mouth, like you are blowing out birthday candles.
- Repeat 5 times.
- After the last breath, cough to try to clear any phlegm or mucus from your lungs.
- Do these deep breathing exercises 4 to 5 times a day in the first 48 hours after surgery.

It is helpful to support your incision with your hand or a pillow when coughing.

Movement

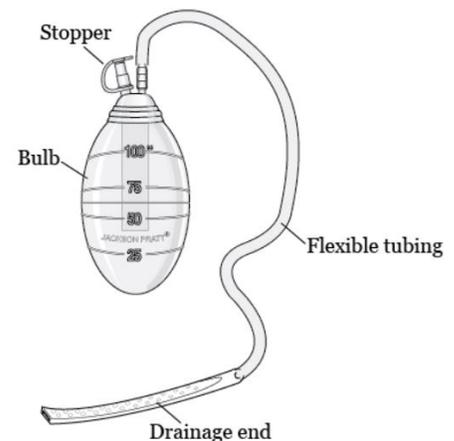
- You should begin to gently move your arms as soon as possible after your surgery. Do not cradle your arms against your chest.

Wound Care

After surgery, the wound is covered with a sterile dressing. It is important to keep it clean and dry until it is well healed.

You may have one or more drainage tube(s) from your surgical site(s). The tube is made of soft plastic and attached to a suction bulb coming out of the skin, near the incision. The drain is placed during surgery and removes fluid that gathers under your incision site during the healing process.

The drain should be pinned to your shirt or bra, **never** pin the drain to your pants.



The nurses will give you instructions on its care before going home from the hospital. There are also instructions in the Guidelines For Home- Drain Care section of this booklet.

The drain will be removed once the amount of fluid draining has decreased. A Home Care (CCAC) Case Manager may visit you in the hospital to arrange nursing visits at home. The staples or sutures are usually removed in 10-14 days.

Guidelines for Home

Pain: It is normal to have some pain, swelling, tenderness and bruising at your incision and the surrounding chest area in the days or weeks following your surgery. If you had lymph nodes removed you may also notice some discomfort in your armpit and down the inside of your arm.

- Take pain medication as needed and any other prescribed medications as directed.
- The pain should lessen, not increase. Call your surgeon if your pain is not relieved with the prescribed medication.
- You may notice bruising developing after surgery. This is normal and will slowly disappear as you heal.

Tips:

- ✓ Many patients find it most comfortable to wear some support after breast surgery to decrease movement of the breast. This can also minimize pull on your surgical incision. Examples of support would be a soft old bra, or a camisole or tank top with a stretch panel in the top.
- ✓ Otherwise, wear loose-fitting, comfortable clothing (e.g., pajamas, nightgowns, oversized t-shirts or sweatshirts) until your wound has healed.
- ✓ Sleep with your arm slightly raised (e.g., place a small pillow under your arms on your surgical side). This will help reduce pressure and keep you more comfortable when you sleep.

Numbness: Numbness may still be present on the surgical side, particularly, down the inside of your upper arm. This can happen because the nerves in the armpit can be affected during surgery. Changes to sensation include:

- Reduced feeling/ loss of feeling
- Numbness or coldness
- Weakness in the arm
- Sensitivity to touch or pressure
- Feelings of burning or tingling

These feelings usually improve or go away over the coming months. Talk to your nurse, surgeon, or family doctor if your symptoms don't improve with time.

Diet: You may resume your normal diet. Try to eat a well-balanced diet; good nutrition helps with healing and fighting infection.

Tips:

- ✓ Choose iron-rich foods, such as red meat, green vegetables, whole grain breads and cereal. Drinking citrus juice is recommended; the vitamin C helps iron to be better absorbed.
 - ✓ Eating high fiber foods will help to keep your bowels soft and prevent constipation and straining. Examples of high fiber foods are: bran cereals, brown breads, prunes, pears.
-

Activity:

It is important to get up and move around gently as soon as you can after surgery. Exercise can help you recover faster and reduce side effects from other treatments. It is important to not push yourself too hard, but to keep in mind exercise and gentle movements can:

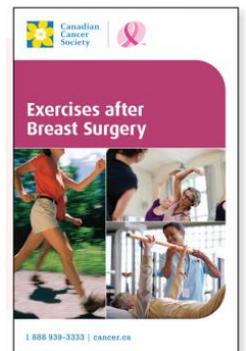
- Help you maintain movement and the range of motion in your arm and shoulder
- Reduce stiffness in your joints
- Reduce pain in your neck and back
- Improve your muscle tone
- Improve your overall mood and well-being

- Resume usual daily activities as tolerated with frequent rest periods. You may tire more easily than usual; remember your body will need energy to heal.
- Resume normal use of your arm for gentle everyday activities.
- **Work:** Your surgeon will advise you on when to return to work.

Tips:

- ✓ Gently moving the arm on the operated side will help to regain mobility. While it may seem like you shouldn't stretch this side, it is very important to do this regularly and slowly to avoid the tendons in your arm and shoulder becoming stiff. **Your surgeon will discuss any specific exercises or restrictions.**
- ✓ Elevating your arm on the side you had surgery will help to decrease and/or avoid swelling of the fingers, hands and arm. You can do this by putting your hand in your pocket while walking rather than swinging it at your side, or elevating it on pillows in bed or on the couch.

The Canadian Cancer Society offers resources on exercise



If the stiffness in your shoulder has not improved after 6 weeks, notify your surgeon, as physiotherapy may be required.

Do Not:

- ✗ **Lift anything heavier than 10 – 15 lbs.;** as you start to heal. Your surgeon will give you a more specific timeline based on the type of breast surgery you had.
- ✗ **Drive** if you are taking opioids for pain, or cannot turn or twist without pain.

Wound Care: You will likely go home with your dressings and drain(s). These will be removed once the amount of fluid draining from your incision decreases. This will be done by a home care nurse or at a follow up appointment.

- Sponge baths are recommended until the drain and/or initial dressing is removed.
 - Avoid products like: talcum powder, deodorants, antiperspirants or scented creams or lotions near your wound.
-

Drain Care:

Emptying the drain means draining fluid out of the container (the bulb) that holds the fluid which comes out of the wound.

- You will empty your drain every 8 hours once you are at home.
- Write down the amount of fluid that you empty from the drain and the time of day. This will be reviewed by a home care nurse or at a follow up appointment.
- The fluid will be red at first and then will become pink in colour. Over time the fluid will look like the colour of apple juice.
- Small clots of blood or tissue may be seen in the drain – this is normal.



How to empty your drain:

1. Wash your hands with soap and warm water. Dry your hands with a clean towel.
2. Take the plug (cap) out of the top of the bulb.
3. Empty the drain's contents into a measuring cup.
4. Squeeze all the air out of the bulb and put the plug back in the top of the bulb (this creates the suction).
5. Once you have recorded the amount (you can use the chart below), empty the cup's contents into the toilet to be flushed away.

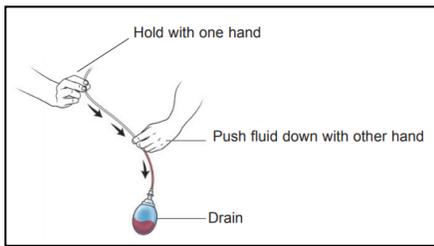
Date	Time #1: _____	Time #2: _____	Time #3: _____	Extra Time: _____
	mL	mL	mL	mL
	mL	mL	mL	mL
	mL	mL	mL	mL
	mL	mL	mL	mL
	mL	mL	mL	mL

What if there is no fluid to empty from the drain? Some of the reasons why there may not be any drainage include:

- The drainage bulb has lost its suction.
- The drainage tubing is blocked.
- There is no more fluid to drain.

To create suction in the bulb, try opening the plug on the bulb and re-closing the plug while squeezing the bulb with your hand. The nurse will show you this before you are discharged from the hospital.

How do I ‘milk the drain’? To stop the tubing from getting blocked (by fluid, tissue or clots), you will need to ‘milk the drain’. ‘Milking’ means to pull the fluid through the tubing with your fingers.



- You will need to ‘milk’ the drain every 3 to 4 hours (only while you are awake).
- Be sure when ‘milking’ to hold the tube firmly closest to the skin. This prevents the drain from pulling on your incision.
- A family member may be able to help you.

When can I expect to have the drain(s) removed?

- You will have the drain(s) for at least a few days and perhaps a few weeks.
- Your drain will come out when the drainage has lessened. A nurse can remove your drain.
- You may take pain medication 30 to 60 minutes before the drain is removed. This does not usually cause pain.
- You may have a small amount of fluid come out of the hole where the drain entered the body. This will stop in 24 to 48 hours. You can put a small gauze bandage over the hole.
- Sometimes after the drain is removed, there may be some fluid collection in the wound. This sometimes needs to be treated by your surgeon.

Side Effects to Know About

In addition to the pain, bruising and numbness described above, you may experience some of the following side effects after your surgery. Talk to your healthcare team (nurses and surgeon) about how you are feeling; most side effects can be managed.

Stiff Shoulder: Some women experience stiffness in their shoulder, particularly after total or modified radical mastectomy.

- Your surgeon or physiotherapist can suggest some exercises to help shoulder pain and improve movement
- **Tips:** start doing gentle movements as soon as possible after your surgery. You can do this before your drain is removed to get some motion back. After your drains are removed and your incision is healed, taking warm (not hot) shower/baths or using a warm pack may help relieve discomfort in your shoulder.

Swelling: Swelling can be caused by a buildup of fluid and is a common symptom after surgery. You may notice swelling in your breast, chest wall, armpit, shoulder and/or arm.

- Most swelling is a normal part of healing and will decrease over time.

- If swelling causes significant discomfort, talk to your health care team.
- **Tips:** wear loose fitting clothing and keep your arm raised to shoulder level or above as much as possible.

Lymphedema: As part of your ongoing recovery it is important to know about the signs and symptoms of lymphedema and act quickly if you notice them. Lymphedema is swelling in the affected arm, hand or chest wall caused by a buildup of lymph fluid. This happens because lymph nodes have either been removed in surgery or potentially damaged from treatments and are unable to filter the lymph fluid as they normally would.

- Lymphedema can happen during the first few weeks after surgery, months or even years later. It can be temporary or a long-term condition.

Managing Lymphedema

- You might be advised to wear a compression sleeve to help decrease swelling. Your doctor will give you more information.
- Watching for signs of Lymphedema: **It is normal to have some swelling right after surgery**, but if it doesn't go away within a few weeks, see someone on your healthcare team as soon as possible (even if you notice years after your surgery).

Signs to watch for include:

- A feeling of fullness, puffiness or heaviness in your arm
- Not as much flexibility or movement in your hand, wrist or arm
- Jewelry (watches, rings, bracelets) feeling tight (without a change in weight)
- Problems fitting your arm into your sleeves
- Redness or increased warmth, which may mean you have an infection.

Axillary Web Syndrome - "Cording": Axillary Web Syndrome (known as 'Cording'), can happen weeks or months after surgery. It can feel like a tight cord running from your armpit down the inner arm, sometimes to the palm of your hand. Some people can see and feel raised cord-like structures below their skin in the chest, torso or arm area. Sometimes these "cords" may limit movements, like reaching for objects overhead, lifting your arms or straightening your elbow.

- We do not know the exact cause of cording. The cords may be a lymphatic vessel or small veins that have been damaged during surgery.
- If you get cording, keep doing your gentle daily stretches to the point of feeling tension but not pain. Cording usually goes away with time but we advise you to follow up with your physiotherapist or health care team as they can give you exercises to help.

Seroma: A seroma is a buildup of clear bodily fluids that can appear a few days following surgery, after your drain has been removed. The area involved (breast or armpit) may have a spot that is swollen and feels like there is liquid underneath

- Most seromas are reabsorbed by the body in about a month, but can take longer

- Call your doctor if the amount of fluid seems to be increasing or the seroma is putting pressure on the healing area. Your doctor can drain it. In some cases, the seroma may have to be drained more than once.

For more information on **How you Might Feel** and **What To Do**, see the colourful ‘Stoplight’ chart on the following page. This includes important information on **when to call your Surgeon**.

Follow-Up Appointment

Call your surgeon’s office to make a follow-up appointment.

Ongoing Recovery

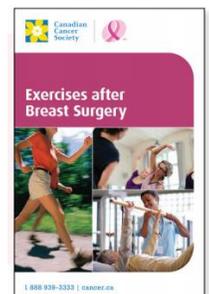
Protect Your Skin

Treat infections as soon as possible. You want to make sure you take extra care to protect your skin and avoid anything that might lead to an infection. Healthy skin is your best defense against infection!

- After your surgical incisions have healed, keep your arm moisturized to prevent it getting dry and cracked (especially in winter).
- Avoid sunburns: Stay out of direct sunlight and wear sunscreen
- Avoid bug bites: Wear insect repellent
- If you do get a cut or burn, wash the area well with soap and water. Keep this area clean and protected until it is healed.

Exercise

- Exercise regularly but don’t overdo it, pay attention to how your body responds and feels. Moving your arm and contracting your muscles will help you move fluid and prevent build up or swelling. Talk to your doctor or physiotherapist about the exercises that are right for you.
- Maintain a healthy body weight – this will decrease your risk of lymphedema.



Avoiding Lymphedema

- Avoid anything tight fitting on your wrist or fingers (e.g., watch, rings) or wearing tight or narrow bra straps. They might trap fluid and lead to swelling.

Talk to you doctor about:

- Using saunas, steam baths and/or hot tubs. Some women find heat makes lymphedema worse. Your doctor will give the appropriate advice for your case.
 - Wearing a compression sleeve when you fly; changes in pressure for long periods of time (over 4 hours) may increase risk of lymphedema. Depending on your case, this might not be necessary.
-

How I Might Feel and What to Do

Action Plan - What to do Every Day!

- Eat a healthy, well-balanced diet (consider including more fiber and iron-rich foods)
- Move around and do any exercises instructed by your surgeon or physio
- Check your wound for redness and bloody or foul smelling drainage

Green Light: All Clear - This zone is your goal!

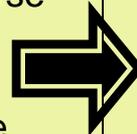
- You are able to move your arm with only mild discomfort and complete any exercises
- You feel well and do not have a fever
- Your wound is not open in any areas
- Your drain requires emptying about every 8 hours
- Your pain is getting less and less



You are on track and your symptoms are under control. Go to your scheduled follow up appointments.

Yellow Light: Caution - This zone is a warning!

- You have swelling in your breast, chest, armpit or arm that is getting worse
- Your pain is not getting better or is getting worse and you have taken your pain medications
- You feel tired a lot
- You are not able to do your exercises or move around comfortably more and more each day
- After a few days, your wound is still draining enough bloody fluid to fill the blub of your drain or your drain has been removed and fluid is building up at your incision site.

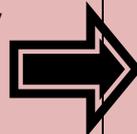


You may need to be seen by your Surgeon.

Call your Surgeon's Office or the Pre Surgical Assessment Office (613) 969-7400 ext. 2827

Red Light: Emergency - This zone means act fast!

- Your wound is draining foul smelling fluid or is getting redder and warmer to touch (infection)
- An area of your wound is coming open
- Fever or chills (temperature above 38°C/100.5°F)
- You have severe pain which is not relieved by medications
- You are very, very tired
- You have shortness of breath or a cough that you did not have before surgery
- Your swelling is getting much worse



Call your Surgeon's Office today to report symptoms and request an appointment.

If you cannot get an appointment, go to your nearest Emergency Department.

*****If you are having chest pain: CALL 911 immediately*****

Emotional Support

Dear friend,

I don't know your name, nor do you know mine, but I am writing this letter to tell you that you are not alone and that I am sorry for your diagnosis. Only 1 ½ years ago I was standing in your place receiving that horrible diagnosis of Breast Cancer, and I remember feeling like a vice was across my chest squeezing the air out of my lungs so much that it hurt to breath. The scar that you will bear, no one should have to, but I want to say that you are incredibly brave for making the decision to have this surgery and that I am very proud of you.

All of the feelings you are going through: anger, fear, disbelief, shock and sadness are part of the journey that you will face. I remember that frantic feeling that I wanted everything done all at once but I want to tell you to take baby steps, tackle one thing at a time, and remember your family are also experiencing these emotions with you- it's easy to forget. One day, not today or perhaps not even for a few months, the sterile smell of the hospital and endless barrage of nurses and doctors, will slowly fade into the background noise and you will almost feel like your old self. Taking a deep breath will not hurt so much.

It is so important to look after yourself, but also please take advantage of all the support that is offered to you with love, whether it is from a friend bringing a meal, or a support group helping you learn to put on a wig, wear make-up or wear a prosthetic. You are never alone. In closing, I am wishing you a speedy recovery and sending lots of positive thoughts and well wishes.

Most sincerely,

Jennifer, RN (fellow breast cancer warrior)



After you have had breast surgery, it is normal to feel emotionally overwhelmed. You may think about the fact that you have been treated for a serious disease. You have had an operation that has changed your appearance, perhaps your self-image. You might wonder how this surgery will affect your lifestyle and personal relationships. You may be unsure how to act towards family and friends. Every woman reacts to breast surgery differently. Expressing your feelings to your doctor and loved ones will help them to understand what you need to recover. Many women like Jennifer find that community services offer valuable support. Please see the following list of resources we have available in the Quinte West region.



The Canadian Cancer Society - Hastings Prince Edward County and Brighton Unit has national support services that are available to all cancer patients and their families. These include:



[Wheels of Hope](#), their transportation service which provides rides from volunteer driver to cancer related appointment.



[Peer match program](#), a one-on-one mentoring program that allows clients to talk to someone who has been there.



[Cancer Information Services](#), clients can contact our trained staff via phone or email.

[Cancer Connections](#), our online community for cancer patients and their caregivers and family.

[Community Services Locator](#) provides a list of various programs and organizations available to cancer patients.



[Quit Smoking](#), smoking is still the leading risk factor for cancer and Smoker's Helpline has a variety of programs to help quit



[Look Good Feel Better](#) Workshops are complimentary workshops open to all women facing cancer and undergoing treatment. Participants are welcome to attend up to one year after receiving their last treatment. These workshops are led by trained cosmetic advisors and hair alternative specialists who donate their time and expertise to helping women with cancer. In addition, the all cosmetics and personal care products provided have been generously donated. We are proud to be hosting Look Good Feel Better Workshops at Belleville General Hospital in our Sills Wing .You can register online or call 1-800-914-5665.

At their local office – 121 Dundas Street East, Suite 104 –they have **The Cancer Resource and Wig Room**. Here they provide real hair and synthetic wigs, scarves and headwear, mastectomy prosthesis, cancer related books, access to a computer to use their online services, and booklets and pamphlets covering a range of topics such as Eating Well When You Have Cancer and When Someone You Know Has Cancer.

For more information: Please call 613-962-0686 | Email: hastings@ccsont.org | go to www.cancer.ca | or visit 121 Dundas St E, Suite 104, Belleville, ON, K8N 1C3

Additional Resources:

Community Services Locator: <http://www.cancer.ca/en/support-and-services/support-services/find-services-in-your-area/?region=on>

The community services locator (CSL) is a directory that helps cancer patients, caregivers and healthcare providers find the services they need. We have over 4000 cancer-related services listed. You can search for:

- Emotional support programs
- Homecare
- How to get to your cancer treatment
- Where to find a wig or prosthesis

If you can't find what you need, all you have to do is email us or call an information specialist at 1 888 939-3333, Monday to Friday, anywhere in Canada.

Tammy's Wig & Mastectomy Boutique: 291 Pinnacle Street (613-969-0049)

Cancer Care Ontario: www.cancercare.on.ca

Survivors Abreast: www.survivorsabreast.com

Canadian Breast Cancer Network: www.cbcn.ca

Rethink Breast Cancer: www.rethinkbreastcancer.com

Notes

Developed By: Surgical Preadmission Clinic, 2003
Approved By: Department of General Surgery, Quinte Health Care
Revised: June, 2008; April, 2017, October 2019