KNOW BEFORE YOU GO

A breast surgeon, who has experience seeing multiple healthy and affected breasts daily, can be the best person to oversee your breast surveillance program and to speak with about surgical options.

ARE WE A GOOD FIT?

- Have you treated patients who are at high risk for developing breast cancer before?
- How many high-risk patients do you have? What were their ages when you began treatment? Were their surgeries before or after a cancer diagnosis?
- Have any of your patients tested positive for either the BRCA1 or BRCA2 mutation? How familiar are you with these and other genetic mutations that could increase my risk for developing breast and/or ovarian cancer?
- What sort of preventative treatment do you recommend for people with a high-risk genetic mutation or a strong family history of breast and/or ovarian cancer?

WHAT IS YOUR EXPERIENCE WITH PATIENTS LIKE ME?

- How many prophylactic mastectomies have you performed? How many each month? Each year?
- Do you keep surveys about your patients’ satisfaction rate?
- At what age do you recommend for carriers of BRCA and other high-risk genetic mutations have this surgery? Why?
- I am not sure that I want to have surgery at this time. Does your practice have a high-risk surveillance program I can participate in?
- Have any of your patients developed breast cancer after their prophylactic mastectomies? What’s the chance of this happening? What are the national statistics? What about in your experience?
- Can I speak with any previous patients who’ve had the same surgery I’m having?

NOTES
TELL ME MORE ABOUT PROPHYLACTIC MASTECTOMY

- When do you recommend breast surgery rather than screening options such as mammograms, MRIs and ultrasounds or chemopreventative options like taking tamoxifen? Why?
- What sort of medical and lifestyle factors should I be considering when I weigh one option versus the others?
- What are my options for the prophylactic mastectomy? What are the pros and cons of each? Will you consider newer techniques, such as nipple sparing? How familiar are you with each option?
- Are there any plastic surgeons you work with on a regular basis?
- Will you perform all of the surgery, or do you allow medical students to step in?
- How much breast tissue will remain after surgery? Will I regain feeling in my breasts?
- What am I going to look like? Can I see before-and-after pictures of your previous patients?
- How will I feel afterward? Emotionally? Physically? How much discomfort or pain do women typically experience?
- How long will my hospital stay and recovery time be? When can I return to my normal activities? Driving? Work?
- Lifting weights? Running? Sex?
- Are there any possible complications I should know about? Risks?
- Will I still need to have preventative screening afterward, such as a yearly mammogram or MRI?

WHAT DO I NEED TO KNOW ABOUT INSURANCE & SCHEDULING?

- How much will this procedure cost me? Can you break down the costs (i.e. breast surgeon, plastic surgeon, anesthesia and hospital stay)? Will my insurance cover it, and will you help me file a claim?
- If my provider denies coverage, would you be willing to help me appeal the decision?
- How far out do you schedule surgeries? What sort of preparation will I need to do?
- Where will the procedure be done? How long will I be in the hospital?
- Will I have any follow-up appointments with you after the surgery? How often? For how long? What can I expect during those appointments?

NOTES

This guide was authored in collaboration with Dina Roth Port, author of the book *Previvors: Facing the Breast Cancer Gene and Making Life- Changing Decisions*.

**BRIGHT PINK** is a national non-profit on a mission to save women’s lives from breast and ovarian cancer by empowering them to live proactively at a young age. For more information or to get involved, visit BrightPink.org.