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Form #3205, Revised, September 2018



BREAST SURGERY

Path to Recovery

Welcome to Peterborough
Regional Health Centre
This booklet will help you on your path
to recovery following breast surgery.



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www.prhc.on.ca



Welcome to Peterborough Regional Health Centre and the Path to Recovery

This booklet was created by the Peterborough Regional Health Centre (PRHC) Breast Assessment Centre and Surgical Outpatient staff. We are a team of specialists that includes surgeons, radiologists, nurses and technologists, working together to provide you with the best care possible.

This booklet has been made to help you know what is going to happen before, during and after your breast surgery.

The information in this booklet is for education purposes only and is not intended to replace the advice of your surgeon. Please contact your surgeon if you have specific questions about your care.

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.

ACKNOWLEDGMENTS

We would like to acknowledge all those who reviewed the content for this publication.

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MY HEALTHCARE TEAM

ANESTHESIOLOGIST: Doctor who sedates and monitors you during surgery.

BREAST HEALTH NAVIGATOR: Healthcare professional with specialized knowledge in breast health. The navigator is available to patients and their families for information, education and support.

DIETITIAN: Healthcare professional with specialized knowledge about the nutrients and minerals required to be as healthy as possible.

GENETIC COUNSELOR: Healthcare professional who specializes in the education and support of patients and their families about inherited conditions (e.g. hereditary breast and/or ovarian cancer, genetic testing).

MEDICAL ONCOLOGIST: Doctor who specializes in treating cancer with medicine (e.g. chemotherapy, hormonal therapy or targeted therapy).

NURSES: Nurses will help look after you during your surgery visit, and home care nurses may be needed to help with the recovery process once at home.

PATHOLOGIST: Doctor who specializes in diagnosing disease through analysis of body fluids and tissue in a lab.

PHARMACIST: Healthcare professional who fills your prescriptions and can help you understand your medications.

PRIMARY CARE PROVIDER: The family doctor or nurse practitioner that you see on a regular basis.

RADIATION ONCOLOGIST: Doctor who specializes in treating cancer with radiation therapy.

RADIOLOGIST: Doctor who specializes in reading and reporting imaging studies (e.g. mammograms, x-rays, MRI, etc.).

SOCIAL WORKER: Healthcare professional who can listen to you and provide the support and information you need (e.g. help with travel arrangements and medication costs during treatment).

SURGEON: Doctor performing your surgery.

TECHNOLOGIST: Healthcare professional who specializes in taking images needed for diagnosing and treating disease (e.g. person who is responsible for taking mammogram pictures).

Your healthcare team will work together with you and your family during this journey. Multidisciplinary Cancer Conferences or “rounds” are held regularly at PRHC. These meetings allow healthcare providers from various specialties to discuss the best diagnostic and treatment path for patients with breast cancer. These meetings help ensure you are receiving the best care possible.

BREAST CANCER CARE

The treatment of breast cancer has become very personal. No two breast cancers are exactly the same. It is unlikely that your breast cancer treatment will be exactly the same as someone else you may talk to.

The diagnosis and treatment of breast cancer is multidisciplinary. This means that physicians & healthcare professionals with a variety of specializations will come together to deliver your care. You and your loved ones are also a crucial part of this healthcare team.



DIAGNOSING BREAST CANCER

The diagnosis of breast cancer may involve some or all of the following:

SCREENING MAMMOGRAM: A mammogram done to look for breast cancer or pre-cancer changes in women who do not already have a diagnosis of breast cancer.

DIAGNOSTIC MAMMOGRAM: A more detailed mammogram, performed when a screening mammogram detects an abnormality or when there is a clinical area of concern (e.g. a lump).

BREAST ULTRASOUND: Often done at the same time as a diagnostic mammogram; this test can also look at the lymph nodes in the armpit (axilla).

BIOPSIES: When the radiologist takes a sample of a lesion in the breast or of a lymph node in the armpit to determine whether cancer or pre-cancer changes are present.

BREAST MRI: A very detailed test that provides additional information in women with certain kinds of tumors. (Breast MRI is not necessary or helpful in all cases).

BONE SCANS: A nuclear medicine test that looks to see if cancer has spread to the bones.

CT SCANS: A special kind of X-ray that looks to see if cancer has spread (metastasized) to other body parts beyond the breast.

TREATMENT OPTIONS

The treatment of breast cancer may involve some or all of the following types of therapy:

SURGERY: The removal of some or all of the breast tissue and/or lymph nodes in the armpit (i.e. lumpectomy or mastectomy).

CHEMOTHERAPY: The delivery of medicine through the bloodstream; the purpose is to kill cancer cells that might have escaped the main tumor.

HORMONE BLOCKING AGENTS (I.E. TAMOXIFEN): A pill, taken once a day for a period of several years, that blocks estrogen and progesterone, reducing the risk of cancer coming back.

TARGETED THERAPY: Drugs designed to target specific types of cancer cells (i.e. Herceptin).

RADIATION THERAPY: Radiation delivered to the breast and sometimes lymph nodes in the armpit; the purpose is to reduce the chance of cancer coming back in the breast.

RECONSTRUCTION: The re-building of a breast after a mastectomy; this can sometimes happen at the same time as the mastectomy, and sometimes has to be delayed until months or years later.

Along with you and your support system, your medical team will work together to develop an individualized treatment plan. The exact treatments chosen and the order in which they are given will depend on your individual situation. For instance, while most patients undergo surgery as the first step, in some cases it is best to deliver chemotherapy before surgery.

BREAST HEALTH SUPPORTS AT PRHC

The Breast Assessment Centre

The Breast Assessment Centre at PRHC offers comprehensive and coordinated services to help diagnose breast disease, as well as assist in treatment planning and monitoring. During this journey you may visit the Breast Assessment Centre and its affiliated departments in Diagnostic Imaging for various tests. The Breast Assessment Centre has a team of specialized staff who will perform and interpret these procedures.

The Role of the Breast Health Navigator

The Breast Health Navigator is a healthcare professional with specialized knowledge in breast health. The navigator is available to patients and their families for information, education and support, and can:

- Answer questions and help prepare you for appointments
- Help you learn about your diagnosis and its treatment
- Find resources and community supports
- Guide you through the healthcare system
- Help you feel more in control of your care
- Help you speak with doctors and staff
- Streamline and schedule appointments

The Breast Health Navigator works out of the Breast Assessment Centre and can be reached at
705-743-2121, x: 2691

APPOINTMENTS BEFORE SURGERY

Surgical Consult

You will have at least one surgical consultation with your surgeon to discuss treatment options and to plan your surgery. Breast cancer surgery often requires more than one consult to ensure the best treatment plan has been decided upon. It is recommended you bring someone with you to these appointments as a second set of ears and to help make note of all the information that is given.

The Preoperative Clinic (Pre-op Clinic)

Based on your medical history, your surgeon MAY determine that you would benefit from attending the Pre-Op Clinic. At this clinic, hospital staff have an opportunity to learn more about your health. Please bring with you all of your prescriptions, over-the-counter, and herbal medications in the original containers. If you have been booked to attend the Pre-Op Clinic your surgeon's office will notify you of the appointment date and time. The Pre-Op Clinic is located on Level 5 of the hospital in Surgery and Outpatient Procedures (SOP).

During this appointment you may speak with:

- an anesthesiologist
- a nurse
- a pharmacy technician

PLANNING AHEAD

You and your healthcare providers will work as a team to make sure your surgery goes smoothly. There are several things you can do in the weeks before your surgery to help:

Learn About Supports Available in Your Community

- You are not alone. There are many supports available for breast cancer patients and they come in various forms. It is recommended you learn about what is available and decide what might work for you.
- Examples of support types include peer support from breast cancer survivors (telephone, in-person or online), formal support from your primary care provider, breast health navigator, counselors and/or social workers; and organized support groups.
- Family and friends can also be good resources for support.

Visit a Specialty Shop for Supplies

- It is recommended to visit a specialty shop for information on post-surgery camisoles, bras, breast forms, etc.

A list of supports and shops is available at the end of this booklet

PLANNING AHEAD

Arrange for Support on Surgery Day

- Your breast surgery may be done on an outpatient basis. This means you will have your surgery and go home the same day. Please arrange ahead of time to have someone drive you home and stay with you that night.
- If your surgeon has arranged for you to stay overnight in the hospital, you will also need someone to drive you home the following day.
- Keep in mind it is a long day and there will be a lot of waiting. Family and friends are welcome, but only one person is allowed to stay with you in the “gowned” waiting room.

Plan Ahead for Your Return Home

- Make sure your house is prepared for when you come home after surgery. Stock your fridge & pantry with pre-prepared, healthy meals.
- You may need some help with household chores such as laundry, vacuuming and groceries.

DAY BEFORE SURGERY

What to do the Night Before Surgery

- You may eat solid foods until 12 midnight the night before surgery
- You may drink clear, non-carbonated fluids up to three (3) hours before surgery
- Take your usual pills in the morning, unless told not to

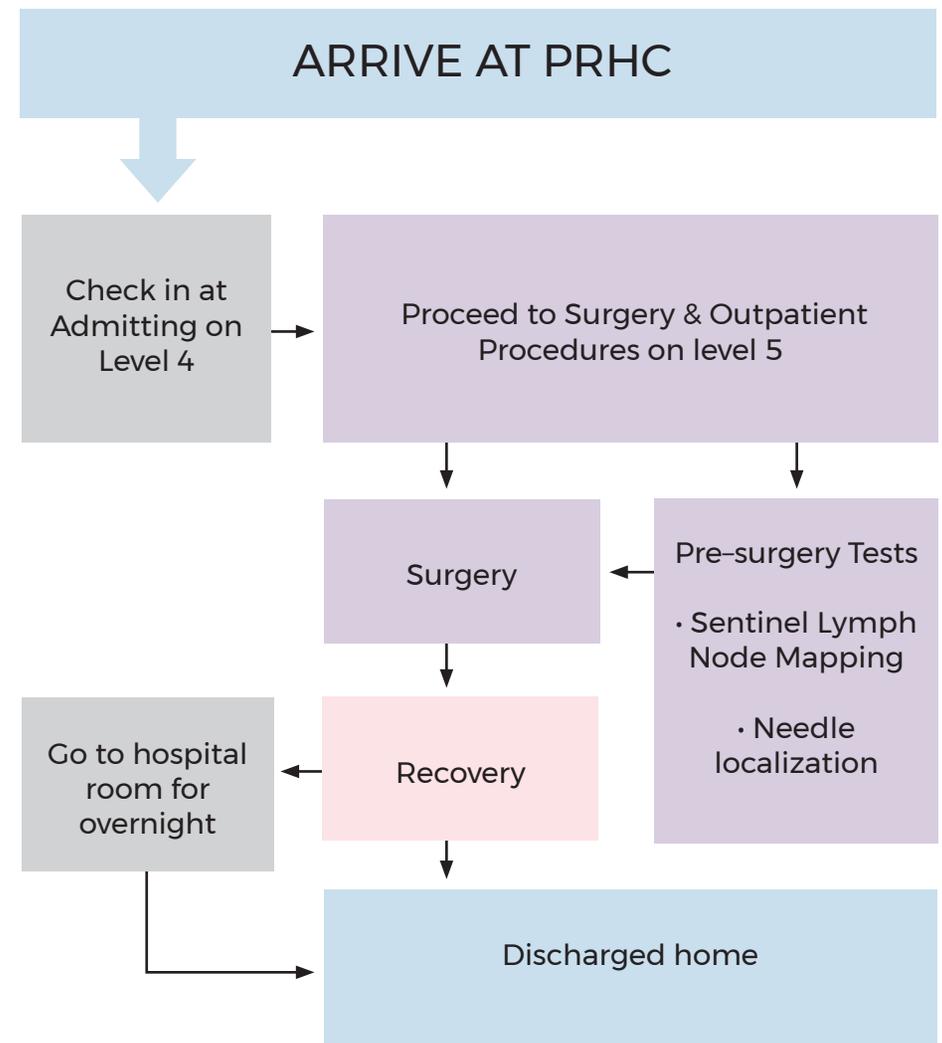
If you are taking any herbal therapies, it is important to discuss them with your surgeon before your surgery, as some herbal medications may cause bleeding or unwanted reactions

Things to Bring on Surgery Day

- Your Ontario Health card
- All the medications you are currently taking (in their original containers)
- Wear loose-fitting clothing that is easy to get off and on, especially a shirt that has a button-up or zip-up closure
- Special post-surgical camisoles are available at local retailers (see page 30 for contact information).
- Leave all valuables, such as jewelry and money, at home.

SURGERY DAY SUMMARY

1. On arrival at PRHC, please go to Admitting on Level 4 first for registration, then proceed to your appointment in Surgery & Outpatient Procedures (SOP) on Level 5.
2. Please report to SOP reception to check-in. You will then wait in the waiting room until you are called by the nurse.
3. Some breast surgeries require tests to be completed before surgery to help pinpoint the exact location of the tumor(s) and lymph node(s). If you are having a Sentinel Lymph Node Biopsy and/or Needle Localization, these will be done on Level 3 in the Breast Assessment Centre or Nuclear Medicine department. These procedures take anywhere from 30 minutes to 3 hours to complete (see details on next pages). PRHC staff will take you to and from these tests.
4. When ready for surgery, you will be taken to the operating room by surgical staff.
5. Once you are in the operating room, your family/friends can wait in the Level 5 surgical waiting room. There is a cafeteria on Level 4, including a 24-hour Tim Hortons.
6. After surgery you will spend about 2 to 3 hours in recovery before being sent home or moved to your hospital room if staying overnight.
7. When you are ready to go home, a family member/friend must be with you. They will need to get a wheelchair from the front lobby (\$1 deposit). You cannot drive for 24 hours after surgery.



LYMPH NODE ASSESSMENT

In patients with breast cancer, the lymph nodes in the armpit are assessed to see whether the cancer has spread beyond the breast. This information helps determine the stage of cancer and what treatment may be needed after surgery. The lymph nodes are assessed at the time of your breast surgery with a sentinel lymph node biopsy. The first few nodes that drain the breast (these are the sentinel nodes) are identified and then removed.

After surgery, the nodes are analyzed by a pathologist. This information will be available at your post-op surgical consult. If the sentinel nodes are free of cancer, then the cancer likely has not spread beyond the breast. If the sentinel nodes do contain cancer, you may need a second surgery to remove additional lymph nodes.

SENTINEL LYMPH NODE BIOPSY

This procedure has two parts. Part 1 will be done in the Nuclear Medicine Department at PRHC on the morning of your surgery. Part 2 will occur during your surgery.

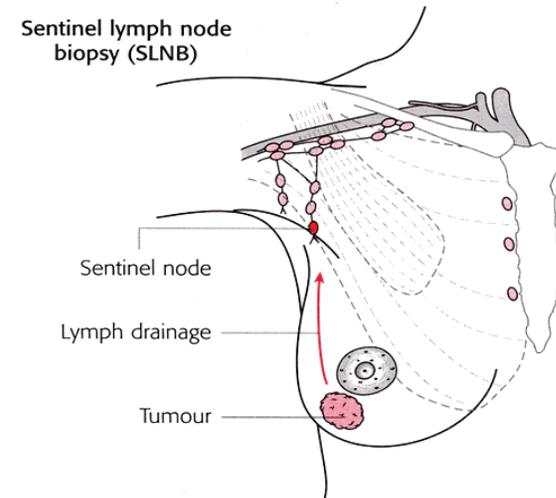
PART 1

A small amount of radioactive tracer is injected into the breast. Freezing cannot be used and so the injection may cause brief discomfort. The tracer is designed to travel to the sentinel node, but this takes time (30 minutes to 2 hours). You will wait in the Nuclear Medicine department during this time. To complete Part 1, images are taken with a special camera to confirm the tracer has moved to the sentinel lymph node.

PART 2:

The actual sentinel lymph node(s) are removed by your surgeon during surgery. The surgeon uses a probe (radiation detector) to help find the node(s) and then removes them.

SENTINEL LYMPH NODE BIOPSY



NOTE: Some women with breast cancer may have all of their lymph nodes removed, not just the sentinel node(s). This procedure is called an axillary lymph node dissection.

NEEDLE (WIRE) LOCALIZATION

If the abnormality (lump) in your breast is small and not easily felt by your surgeon, you may need to have the lump localized before your surgery. This procedure helps to ensure your surgeon removes all of the abnormal tissue.

This procedure will be performed by a radiologist in the Breast Assessment Centre at PRHC a few hours before your scheduled surgery time. It will take about 30 to 60 minutes. Initially, ultrasound and/or mammography images will be taken to find the lump.

A radiologist will then give you some local freezing to numb your breast. The radiologist will then guide a fine wire into the breast to pinpoint the area to be removed. The wire will not move once it is in place and will be removed during your surgery.

During the surgery, after the lump is removed, the tissue will be imaged and viewed by the radiologist. The radiologist will confirm with your surgeon that the lump and some normal tissue around it has been removed (i.e. clear margins). This all happens while you are still asleep in the operating room.

IN THE OPERATING ROOM

In the operating room, you will be greeted by members of your surgical team, including your surgeon, anesthesiologist, and nursing staff. Several people will ask you your name, date of birth, allergies, and the surgery you are going to have. This is for your safety. If anything sounds incorrect, speak up!

IN THE RECOVERY ROOM

After your surgery, you will be taken to the recovery room. While there, you will have:

- An IV drip to give you fluid or medicine
- A nurse who will ask you about your pain
- Oxygen through a face mask or a tube in your nose
- Monitors to check your blood pressure and heart rate

You ALSO may have:

- Jackson Pratt (JP) drain to remove excess fluid from the surgery site (see page 27 for details)

ADJUSTING AFTER SURGERY

- Your first meal after surgery should be light
- Deep breathing exercises should be done every hour while awake
- Do not drink alcoholic beverages (beer, wine & spirits) for 24 hours following your surgery. Alcohol can influence the effects of the drugs you have been given.
- Women who have had a lumpectomy should wear a supportive sports-type bra (without an underwire) with light gauze against the incision when the original dressing is removed.
- Women who have had a mastectomy may find a cotton camisole comfortable after the larger dressing has been removed.



POST-SURGERY CARE

Nursing Care

NOTE: Not all breast surgery requires nursing care at home

- Your surgeon may request nursing care from Central East LHIN Home & Community Care.
- Nursing care is usually arranged for the day after surgery and beyond as needed. A Care Coordinator will visit you in recovery at PRHC or contact you at home after surgery to set up your services.
- The Care Coordinator will arrange for a nurse to visit your home the day after surgery OR arrange an appointment at a local clinic for care.

The nurse will:

- monitor your wound, dressing, drains and general well-being
- teach you how to care for your drain(s)
- remove your drain as per your surgeon's orders
- teach you some range of motion exercises to improve your mobility

Follow up visits will depend on the nurse's assessment, your surgeon's directives and the Care Coordinator's assessment.

COMMON CONCERNS

PAIN: You are likely to have discomfort/pain after your surgery. Everyone's experience will be different, so take your pain medications as needed. Do not drink alcohol or drive when taking narcotics.

Some pain medication can cause constipation. Use an over-the-counter stool softener if needed. Be sure to drink plenty of clear fluids and eat high-fiber foods.

BRUISING: After surgery, bruising is normal and will gradually disappear with time.

SENSATIONS: After surgery you may feel numbness, tingling, burning or a sense of tightness or weakness. These sensations for most people may disappear within 6 months to one year after surgery, but in some cases may be permanent.

Sensations may be decreased near the operation area and the inner part of your upper arm, since there were nerves affected during your surgery. If you have reduced sensation under your arm, you should only use an electric razor to shave your underarms.

FATIGUE: It is normal to feel tired for a few weeks. Nap when you need to and do not plan to do too much.

DRESSINGS: The incision(s) will be covered; your surgeon will decide what dressings are appropriate.

BATHING/SHOWERING: You can bathe/shower after 48 hours and pat the incision dry.

SEROMA & DRAIN CARE

SEROMA

- A seroma is a collection of fluid under the skin after surgery. It is very common and treatable and does not indicate worse cosmetic results.
- A seroma can occur whether you have had a drain in place or not. Your body will reabsorb this fluid. If there is a large amount of fluid, it may need to be drained. If necessary, the seroma can be drained in the clinic by your surgeon. You do not need to go to the Emergency Department unless you have signs of infection (see page 29).

DRAIN CARE

NOTE: Not all breast surgery requires a drain

- Your surgeon may use a surgical drain called a Jackson-Pratt (JP) drain. The drain will help to remove fluid that collects at the surgery site. Each drain is held in place by a stitch.
- The drains are usually left in place for 1-3 weeks after surgery and are removed once drainage has decreased to a certain amount.
- If the drain is taken out too early, fluid can collect creating a tender, swollen area called a seroma.
- The drain(s) will be removed by your nurse or surgeon.
- When the drain is removed, you may feel a pulling sensation with some pain for a few seconds. A small bandage will be placed over the drain site.

LYMPHEDEMA

- Lymphedema is a possible risk associated with breast cancer treatment (i.e. surgery and radiation therapy) and can appear at any time, shortly after surgery or many years after completing treatments.
- When the lymphatic system is damaged or blocked, fluid will build up causing swelling of the surrounding tissues. With breast surgery, lymphedema may present in the arm on the same side as your surgery.
- There are many things that you can do to prevent lymphedema, as well as manage it once it appears. For example: compression garments, manual lymphatic drainage, skin care, exercise, nutrition, proper-fitting clothing, etc.

NOTE: *medical compression garments require a prescription from a physician.*

SIGNS OF LYMPHEDEMA

The start of lymphedema can be very hard to notice, but it is very important to treat it quickly. Tell your doctor right away if you notice swelling in your hand or arm, even if it happens years after treatment. Other signs to watch for:

- Skin feeling tight, fullness, puffiness/heaviness in arm
- Decreased flexibility of movement in the hand/wrist/arm
- Problems fitting your arm into your sleeve
- Jewelry & watches feeling tight without weight gain
- Redness, increased warmth (might indicate an infection)

SIGNS OF INFECTION SHOULD BE REPORTED TO YOUR DOCTOR RIGHT AWAY

For more information, visit the Lymphedema Association of Ontario's web-site at: www.lymphontario.ca

WHEN TO CALL YOUR SURGEON

Call your surgeon or go to the nearest emergency department (ED) if you have any of the following symptoms:

A fever (temperature greater than 38°C or 100°F).
You may or may not have chills.

Increased redness and swelling around the drain or incision site that has increased since you left the hospital.

Foul-smelling drainage from the drain or the incision site.

Pain not relieved by pain medication.



POST-SURGERY ACTIVITY

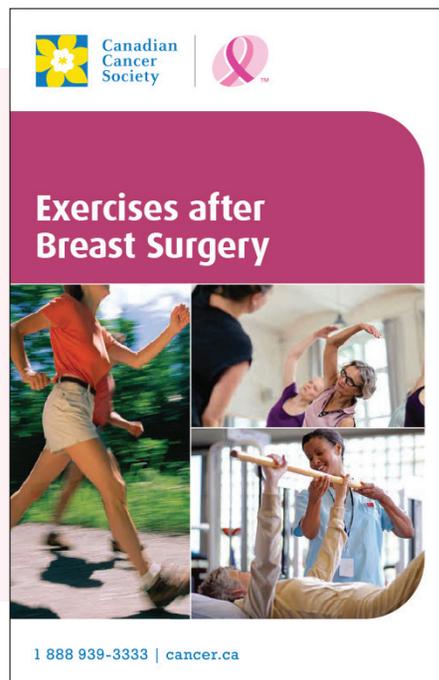
It is very important to remain active. Simple exercises like walking around the house and pumping your leg muscles can prevent you from developing clots in your legs. After surgery there may be days when you feel tired. Listen to your body. Rest will help in your recovery.

Follow the Canadian Cancer Society's booklet "Exercises after Breast Surgery" for time-specific exercises. The booklet is divided into exercises for right after surgery, during the first stage of healing (or when drain(s) have been removed), and during the second stage of healing.

The booklet can be downloaded from:
www.cancer.ca

Hard copies are available from your local Canadian Cancer Society office:
1-888-939-3333

Hard copies are also available in the Breast Assessment Centre at PRHC.



POST-SURGERY ACTIVITY: TO DO

- Use your affected arm as normally as possible unless limited by pain
- Use your arm for light activities (i.e. bathing and eating)
- Pace yourself: balance periods of activity with rest
- Walk. If you have pain in your arm while walking, use your jacket/sweater pocket to support your arm
- Maintain good posture
- Elevate and support your arm with pillows while sitting or lying down

POST-SURGERY ACTIVITY: TO AVOID

- Lifting more than 1 kg (2.5 lbs) for 2 weeks after surgery
- Lifting more than 4 kg (10 lbs) for 4 weeks after your surgery
- Getting out of bed using the arm and side of your surgery
- Refrain from driving if you are taking pain medication with narcotics (such as Percocet, Tylenol #3 or hydromorphone)
- Refrain from driving if you have limited movement of your arm or if you have a drain in place
- Strenuous exercise until the wound has healed (4 weeks)
- Sudden movements until the drain is removed and the incision is healed

INFORMATION & EMOTIONAL SUPPORT

**PRHC BREAST
ASSESSMENT CENTRE**
705-740-8166
1 Hospital Drive
Peterborough, ON
www.prhc.on.ca

Dedicated Breast Health Navigator to help support you and your family during the diagnosis and treatment of breast cancer. Access to printed information and materials.

**CANADIAN CANCER SOCIETY
PETERBOROUGH CHAPTER**
705-742-3823
730 The Kingsway Unit 2
Peterborough, ON
www.cancer.ca

Information, telephone and online support, transportation program, gently used wigs/hair coverings and prostheses.

**PETERBOROUGH BREAST
CANCER SUPPORT GROUP**
705-745-7579
Grace United Church,
581 Howden Avenue
Peterborough, ON

Monthly peer support group for women and their families who have been affected by breast cancer. Telephone support and resource library available as well.

HOSPICE PETERBOROUGH
705-742-4042
439 Rubidge Street
Peterborough, ON
www.hospicepeterborough.org

Support through serious illness and grief including wellness programs, support groups and volunteer support for practical help. Support for children and caregivers. Lending library.

HEARTH PLACE, OSHAWA
905-579-4833
86 Colborne Street West,
Oshawa
www.hearthplace.org

Comprehensive support center for those living with cancer. Individual and group support, information, resource center, wellness programs and ongoing lectures and discussion series.

**SURVIVOR'S ABREAST
DRAGON BOAT TEAM**
www.survivorsabreast.com

A group of breast cancer survivors from the Peterborough area in various stages of treatment and recovery. They have something else in common – strength of spirit. They are committed to living our lives to the fullest and sharing that expectation and hope with others. Weekly practices at Trent University rowing tank October – May; twice weekly practices on Little Lake May - September. Hosts of the annual Peterborough Dragon Boat Festival.

PROSTHETIC & FASHION ASSISTANCE

MY LEFT BREAST
705-876-3333
203 Simcoe St,
Charlotte Mews,
Peterborough
www.myleftbreast.ca

A local shop that is owned and operated by breast cancer survivors. Staff offer professional bra fitting for everyone, mastectomy bra fittings, prostheses, mastectomy bathing suits and leisure wear, wigs, hats, scarves and Buffs. Breast cancer surgery patients should visit the shop prior to surgery to be fitted for one complimentary post-surgical camisole or bra. ADP (Assistive Devices Program) registered fitters and vendor for Lymphedema compression garments.

THE BRA BOUTIQUE
705-742-0822
1135 Lansdowne Street West,
Peterborough, ON
www.thebraboutique.ca

Mastectomy bras and breast forms. The Bra Boutique also has a shop in Cobourg, ON.

continued on next page

PROSTHETIC & FASHION ASSISTANCE

SHOPPERS HOME HEALTH CARE 705-743-5100

745 Lansdowne Street West
Peterborough, ON
www.shoppershomehealthcare.ca

Wide range of products and services that assist women while preparing for surgery, immediately following surgery and moving through various stages of healing (e.g. post-surgical bras and camisoles with drainage pouches, temporary breast forms, silicone breast forms and comfortable bras and swimsuits).

LOOK GOOD FEEL BETTER 705-740-8326

PRHC Cancer Care
1 Hospital Dr, Level 4
Peterborough, ON
www.lgfb.ca

Monthly two-hour workshop held by volunteer experts in cosmetics, skin and hair care, to help you look and feel more like yourself during or after treatment for all types of cancer.

FROM THE NECK UP 705-775-2797

768 Victory Crescent
Peterborough, ON
www.fromtheneckup.ca

Helping women suffering from hair loss due to medical treatments, alopecia, female pattern baldness or simply want to enjoy a great hair day everyday. We carry a wide variety of solutions; beautiful wigs and hair prosthesis in human hair as well as synthetic, toppers, volumizers, scarves and comfort caps. Owned and operated by a licensed hair stylist. No fee or obligation for consultation.

FINANCIAL SUPPORT

ASSISTIVE DEVICES PROGRAM (ADP)

[www.ontario.ca/page/
assistive-devices-program](http://www.ontario.ca/page/assistive-devices-program)

Part of the cost of breast prostheses and compression garments is covered by this program. Private health insurance plans may also cover the cost of prostheses and/or bras. Contact your private insurance company and/or your employer's Human Resources department for more information.

KELLY SHIRES FOUNDATION www.kellyshiresfoundation.org

Offering financial assistance to breast cancer patients for many of the unforeseen expenses (e.g. wigs, prostheses, transportation, accommodation, parking, etc.) which may not be covered with public and private insurance in an effort to reduce financial stress.

INTERNET RESOURCES

CANADIAN CANCER SOCIETY

www.cancer.ca

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