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# Having Female-to-Male Subcutaneous Mastectomy and Chest Contouring

*Gendered terms are used here to talk about anatomy and health risk. Please use this information in a way that works best for you and your health care provider as you talk about your care .*

Female-to-male subcutaneous mastectomy and chest counterling is a type of gender-affirming surgery. It's also called transmasculine top surgery.

## Why is this procedure done?

Subcutaneous mastectomy and chest contouring is done to give a person a more male-looking chest. An experienced plastic surgeon removes both breasts and reshapes the chest area.

## What happens before the procedure?

Your health care provider will ask about your health. They will also give you a physical exam. They will note the size and shape of your breasts. Some photos may be taken. This information helps your provider plan the surgery.

You may also need some tests, such as blood work or imaging tests. Tell your provider about all the medicines you take. That includes prescriptions, over-the-counter medicines, herbs, and supplements. You'll be asked to sign an informed consent form. Signing this document means that your provider has explained the procedure's risks, benefits, and options. Ask any questions you have before you sign this form.

## What happens during the procedure?

Subcutaneous mastectomy and chest contouring can be done many ways. Your plastic surgeon will decide on the best approach for you. The procedure may be done in a hospital or surgery center.

In general, the surgery includes the following steps:

- The surgeon will put marks on your chest. These are used as reference points during the surgery.
- You will lie down on your back on the operating table.
- You will be given medicine through an IV. This medicine will help you relax and sleep during the procedure. This is called general anesthesia. You won't feel any pain.
- The surgeon will make incisions (cuts) in your chest to remove breast tissue. The surgeon may also remove excess skin.
- The surgeon will reshape the look of your chest. The nipples and areolas may also be moved, if needed.
- The surgeon may put in a drain at the incision site to remove any fluid that builds up.

- The surgeon will close the cut or cuts.
- The surgeon may put a compression wrap around your chest.

## What happens after the procedure?

After the surgery, you'll be taken to a recovery room. Your care team will closely watch your heart rate, blood pressure, and temperature. You will be given pain medicine and fluids.

When you are ready to go home, make sure you follow all care instructions from your health care provider. These will include how to care for your surgical wounds and when to take your pain medicines. You may also have to limit your activity for a while.

Full recovery may take from 6 to 12 weeks. Keep all follow-up visits with your provider to make sure you are healing well. Talk with your provider if you have any questions or concerns.

## Risks of the procedure

Subcutaneous mastectomy and chest contouring has the following risks:

- Bleeding
- Infection
- Surgical wounds that don't heal well
- Blood clots
- Loss of feeling in the nipples
- Loss of the nipple and areola
- Need for another surgery

## Call 911

Call 911 if you have:

- Trouble breathing.
- Chest pain.

## When to contact your doctor

Contact your health care provider if you have any of the following:

- Fever of 100.4°F (38°C) or higher, or as directed by your provider
- Chills
- A change in the way the drainage looks, or drainage soaks the dressing
- Incision opens up or the edges pull apart

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- Signs of infection around the incision, such as redness, drainage, warmth, and increased pain
  - Any unusual bleeding or bleeding that soaks the dressing
  - Any new or worsening symptoms
  - Any other problems your provider told you to watch for and report

## Questions for your health care provider

If you are thinking about female-to-male subcutaneous mastectomy and chest contouring, here are some questions to ask your provider:

- Is the procedure covered by my insurance? Do you have an advocate to help coordinate with my insurance company?
- Where will the surgery be done, and will I need to stay in the hospital?
- Will I have dressings, bandages, or drains after my surgery? If so, when will they be removed?
- What are my activity restrictions after surgery? When can I resume my normal activities like work?
- When can I drive after surgery?
- When can I shower or bathe?
- How will I be kept comfortable after surgery?
- How long will healing take?