



SARATH PALAKODETI

DO · FACS · FAACS

Comprehensive Breast & Aesthetic Surgery

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PATIENT DECISION GUIDE

Mastectomy — Understanding Your Three Options

A guide to help you understand aesthetic flat closure, skin-sparing mastectomy, and nipple-sparing mastectomy — what each involves, who each is right for, and what honest expectations look like for all three.

AESTHETIC FLAT CLOSURE

No Reconstruction

- Mastectomy with deliberate flat chest wall result
- Planned from the start — not a default or fallback
- Smooth, well-contoured result when properly planned
- Shortest recovery — least surgical complexity
- No implant, no donor site, no long-term maintenance
- All future reconstructive options remain available

SKIN-SPARING MASTECTOMY

Nipple Removed, Skin Preserved

- Removes all breast tissue including nipple-areolar complex
- Preserves breast skin envelope for reconstruction
- Standard approach when nipple cannot be safely preserved
- Excellent reconstructive result with immediate implant
- Nipple can be reconstructed or tattooed in a secondary procedure
- Right for tumors close to or involving the nipple

NIPPLE-SPARING MASTECTOMY

Nipple & Skin Preserved

- Removes all breast tissue — preserves nipple-areolar complex
- Most natural reconstructive result
- Oncologically safe in appropriately selected patients
- Intraoperative frozen section confirms nipple tissue is clear
- Ideal for BRCA/prophylactic mastectomy patients
- Sensation often reduced — appearance preserved

THE KEY CLINICAL INSIGHTS

Three legitimate options. One honest conversation.

Aesthetic flat closure is a complete, valid surgical choice — not a default. A mastectomy planned for flat closure produces a significantly better result than one that was not. Tell your surgeon before surgery, not after. Nipple-sparing mastectomy is oncologically safe in appropriately selected patients — the tissue is fully removed, only the skin is preserved. One honest caveat: most patients experience significantly reduced nipple sensation after mastectomy regardless of type. The nipple is preserved for appearance. Sensation recovery is variable and not guaranteed.

FACTORS THAT INFLUENCE THE DECISION

FLAT CLOSURE MAY BE RIGHT IF

- You do not wish to pursue reconstruction now or in the future
- You want to minimize surgical complexity and long-term maintenance
- You want time before deciding — flat now, reconstruction later if desired
- You feel whole without a reconstructed breast

SKIN-SPARING MAY BE RIGHT IF

- You want reconstruction but tumor location precludes nipple preservation
- Intraoperative frozen section shows retroareolar involvement
- Breast anatomy makes nipple viability uncertain after mastectomy
- Inflammatory breast cancer or Paget disease of the nipple is present

NIPPLE-SPARING MAY BE RIGHT IF

- Tumor is at least 2cm from the nipple-areolar complex
- Imaging shows no retroareolar tumor involvement
- Breast anatomy supports nipple viability after mastectomy
- Prophylactic mastectomy for BRCA or high genetic risk

QUESTIONS TO ASK YOUR SURGEON

Bring this list to your surgical consultation. Check off the ones you've discussed.

ABOUT MY OPTIONS

- Based on my tumor location, am I a candidate for nipple-sparing mastectomy?
- If I prefer flat closure, can my mastectomy be planned specifically for that goal?
- What does my imaging show about retroareolar tissue involvement?
- Will intraoperative frozen section be used — and what happens if it is positive?

ABOUT RECONSTRUCTION & FLAT CLOSURE

- If I choose flat closure now, what does delayed reconstruction involve later?
- Am I a candidate for direct-to-implant reconstruction?
- What does the reconstructed breast look like with each approach?
- Can the nipple be reconstructed later if I choose skin-sparing mastectomy?

ABOUT SENSATION & APPEARANCE

- What should I realistically expect in terms of nipple sensation after NSM?
- What does a well-planned aesthetic flat closure look like and feel like?
- Is any sensation recovery possible after NSM, and over what timeframe?
- What would you recommend for a patient in my exact situation — and why?

ABOUT RECOVERY

- What is my expected recovery timeline for each approach?
- Will reconstruction be performed at the same time as my mastectomy?
- What activity restrictions should I expect and for how long?
- When can I expect to see the final result after surgery?

MY QUESTIONS & NOTES

Write your own questions and notes below. Bring this page to your appointment.

Sarath Palakodeti, DO, FACS, FAACS
Comprehensive Breast & Aesthetic Surgery

Phone: (270) 780-0579
Address: 484 Golden Autumn Way, Ste 201
Bowling Green, KY 42103

Web: drpalakodeti.com
Hours: Mon–Fri, 8AM–5PM