

Post-Op Instructions for Neck Operations

Parotidectomy, thyroidectomy, parathyroidectomy, MIRP,

excision of submandibular gland, carotid body tumors, vagus nerve stimulation,

branchial cleft cysts, thyroglossal duct cysts, lymph nodes...

Diet

Patients who have received general anesthesia may experience nausea and occasionally, vomiting. It is therefore preferable to eat a bland light meal or a liquid diet on the first day after the surgery. Regular diet may be resumed the next day. Also, pain pills may cause nausea if taken on an empty stomach. It is preferable to take those pills with a piece of toast or some food.

Activity and Wound Care

Elevate the head as much as possible. Sit in a recliner or use two or three pillows when sleeping. Head elevation reduces bruising and swelling. Occasionally, you may notice that the bruises or swelling have migrated to other places (usually lower regions). You may have a dressing or your wound may be exposed.

Wounds sealed with Dermabond acrylic coating:

Your wound may be sealed with a coat of [clear Nylon-like compound called Tegaderm](#). This protects the wound and allows you to take a shower without covering it. Do not apply antibiotic ointment over this acrylic coat; it will peel off by itself in 10 – 15 days.

For exposed wounds:

If your wound is not sealed with clean Tegaderm, keep the exposed wound dry. Avoid showers. You may take a bath with lukewarm (not hot) water. If accidentally, water reaches the wound, dry it immediately with a clean towel. Make sure you have someone with you in the house in case you feel drowsy or fainty from taking pain killers. Clean the wound once a day. This is best done with a cotton swab dipped in 3% hydrogen peroxide. If you have not received a prescription for antibiotic ointment, use over-the-counter triple antibiotic. Apply a scanty amount on the suture line. At times, you may not see the sutures because they have

been placed inside the wound. On other occasions, there may be metallic staples instead of sutures. Occasionally, a thin film of clear adhesive is placed over the wound to protect it and allow you to take a shower.

Wounds with dressings or drains:

In rare instances, you may have a [dressing or a drain](#). Unless specifically instructed, do not remove them. Avoid showers and keep the dressing dry. Some dressings may be sutured to the skin. Do not attempt to remove them. Drainage is expected for two to three days after surgery. Just kink the [drain tubing](#), before detaching the [bulb](#) and emptying it. By kinking the tubing, you prevent air and old drainage from being sucked back into the wound.

Medications

An antibiotic is usually prescribed for seven to ten days following the surgery. You may also receive a prescription for painkillers in the form of codeine or hydrocodone. These products cause somnolence, drowsiness and constipation. Occasionally, Phenergan suppositories may be necessary for nausea or vomiting.

Follow-up

Please return to follow up to be seen in the office as per the appointment that was given to you

PHONE: 410- 554 4455 at our Union Memorial Hospital office, 433-444 4848 at our Good Samaritan Hospital office, 410-554 NOSE (6673) at our Lutherville Office