**PERIOPERATIVE SERVICES**

**Post-Operative Instructions for Total Thyroidectomy or Completion Thyroidectomy, Parathyroidectomy**

All patients recover at different rates. However, after surgery it is normal to feel the following:

* Neck discomfort and numbness/tingling from the level of the chin to the shoulder
* Discomfort when swallowing
* Ear and jaw discomfort

**PAIN**:

Use Tylenol™ (acetaminophen) as directed for pain medication. Your surgeon may have also given you a prescription for a narcotic, in case your pain is severe. Please take the pain medication prescribed by your surgeon as instructed when needed. If you take narcotic medication, do not drive a car or drink alcohol while taking this medication. You should avoid non-steroidal anti-inflammatory drugs (NSAIDS) such as aspirin, ibuprofen, naproxen (Excedrin®, Motrin®, Naprosyn®, Advil®) because these drugs are mild blood thinners and may result in bleeding into the face or neck tissue. Take these drugs ONLY if instructed to do so by
your surgeon.

**OPERATIVE SITE:**

Your surgeon will tell you when the dressing will be changed. Try to keep your dressing dry. You may reinforce your dressing as needed. This is done by
adding another layer of gauze over existing dressing. You may have paper tapes (Steri-strips™) over your incision. Keep Steri-strips™ on for up to 7 days, if they have not fallen off on their own. If you have a drain, your surgeon will tell you when it will be removed. The nurse will teach you how to care for your drain.

Try to sleep with your head upon extra pillows to help decrease swelling of
your incision. Keep your incision dry for 48 hours. You may shower 48 hours
after your surgery. You can let soapy water run over the incision. Pat your incision dry with a clean towel. Do not soak your incision. Your incisions are sensitive
to sunlight. For one year following surgery you should use sunscreen to prevent darkening of the scar area. Your voice may be slightly hoarse or weak after surgery. Your voice should return to normal within several days to weeks.

Information is available in alternate formats upon request

**ACTIVITY**:

Avoid heavy lifting (anything greater than 10 pounds or 4.5 kg) or strenuous activity for 2 weeks after surgery. Gradually increase your activity each day with frequent rest periods. Avoid sitting for prolonged periods of time to help prevent blood clots. Your surgeon will advise you when you can return to work. Resume driving when you are pain free and are no longer on pain medication. You should be able to move your head in all directions without pain before driving. Do not swim or use hot tubs/saunas for 10 days.

**DIET:**

There are no food or drink restrictions after the surgery. It is best to start on fluids and increase your diet to soft foods. If you have discomfort swallowing, it may be helpful to take pain medication 30 minutes before eating. Avoid hard or crunchy to swallow foods, such as chips, crackers, for a few days. Constipation may be a side effect of the narcotic pain medication. Increase the fibre in your diet and drink plenty of fluids to help prevent constipation. Good sources of fiber are fruits, vegetables and whole grain breads and cereals (All Bran™, Bran Flakes, Shreddies™ and Shredded Wheat). You may also purchase an over the counter stool softener like Colace™ or a mild laxative if needed.

**FOLLOW UP**:

Your follow-up appointment in the office should be scheduled prior to your surgery (at the time of your surgeon’s office visit before your surgery). If you do not have an appointment time, please contact the office when you arrive home from the hospital.

**ADDITIONAL INFORMATION**:

* Calcium and vitamin D: A prescription may have been given for Calcium and Vitamin D (Rocaltrol™). It is imperative that you take these as prescribed. Your calcium levels will be checked at your post-operative visit to determine when/if these medications can be reduced and/or stopped
* Thyroid medication: your surgeon will advise you when to start taking your thyroid medication, usually this is the day after your surgery
* You may resume your regular medications as directed. If you were taking blood thinning medication prior to your surgery, discuss with your surgeon when to resume
* If you have sore/stiff muscles in your back, shoulders or neck, gently massaging your neck muscles and/or doing neck exercises (see Neck Exercises below) will improve stiffness you may experience

**NECK EXERCISES**

These exercises are intended as guide: do not begin doing neck exercises before directed by your surgeon. These neck exercises help to increase your range of motion after thyroid surgery. Patients can feel tight across the neck area where a scar is forming, and neck exercises can alleviate some of those feelings of discomfort.

Always go as far as is comfortable. It is normal to feel some discomfort near the end of your motion.

Go backwards and downwards

1. Start with your head in neutral position
2. Tilt your head backwards
3. Return to center
4. Tilt your head downwards
5. Return your head to the center

Tilt from side to side

1. Start with your head in the neutral position
2. Tilt your head to the left, trying to bring your left ear closer to your left shoulder
3. Return to the middle
4. Tilt your head to the right , trying to bring your right ear closer to your right shoulder
5. Return your head to the middle

Turning from side to side

1. Start with your head in the neutral position
2. Turn your head to the right
3. Look over your right shoulder
4. Return your head to the middle
5. Turn your head to the left
6. Look over your left shoulder

Repeat all of these exercises 10 times. You can perform them a couple of times per day. Don’t worry if you can’t go too far on the first day- every day you will start to see an improvement! Never go beyond your limits or push yourself so much that it hurts.

**Go to the nearest Emergency Department if you have any of the following:**

* If there is a problem with swallowing, breathing or new changes in our voice such as persistent hoarseness or loss of voice
* If the incision becomes hard, red and painful, or has green-yellow pus
* Elevated temperature (38ºC or 100.4ºF) and/or chills lasting more than 24 hours
* It is possible that despite calcium supplementation, your calcium levels may drop to below normal. If you experience muscle cramping or numbness/tingling around your lips or finger tips, please proceed to nearest Emergency Department. Inform them of your surgery and indicate that your serum calcium must be tested. If it is low, you may require intravenous calcium and you may possibly be admitted to hospital

Patient safety is very important to Queensway Carleton Hospital and this information is provided to patients/families to help inform you of your essential role in your own safety.

The information contained in this booklet is not specific medical advice, nor a substitute for medical advice. For your safety, it is advised that you speak with your doctor and healthcare team about your particular healthcare needs.

Protect yourself! Clean your hands frequently and ask your healthcare providers and visitors to do the same. Clean hands save lives.