PERIOPERATIVE SERVICES

Post‑Operative Instructions

Parotidectomy

At the time of surgery, a small drainage tube may be placed in your upper neck to prevent accumulation of blood and fluid under the skin. The drain may be removed before leaving the hospital or home care will be arranged to come to your home to remove it in a few days.

PAIN:

Patients report moderate facial and neck pain for several days following parotidectomy. This is usually well controlled with prescription strength oral pain medications. Please take the pain medication prescribed by your surgeon when needed. 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 in your face or neck tissue. Take these drugs ONLY if instructed to do so by your surgeon.

OPERATIVE SITE:

Great care is taken to carefully dissect the parotid gland away from your facial nerve. Your surgeon will assess your facial nerve function immediately after you awaken from surgery. You may have some redness, bruising on your face, due to the testing of your facial nerves. The facial redness and/or bruising will fade in a few days.

You will be instructed by your surgeon on how to care for your incision.

Do not wash or manipulate the neck incision for 48 hours following surgery (except to apply ointment if your surgeon instructs you to do so). If you have a dressing on your neck, it will be removed the morning following your surgery. Mild redness and swelling around the wound is normal and will decrease over the 2 weeks following your surgery.

You may shower and allow the incision to get wet after 48 hours following your surgery. Allow soap and water to run over the incision. Do not scrub or manipulate the incision for 7 days; pat dry with a clean towel, do not rub it.

CONTINUED ON OTHER SIDE 🡪

Information is available in alternate formats upon request

After 7 days you may gently lather the incision with soap and water.

ACTIVITY:

Sleep with your head elevated for the first 48 hours. You may use two pillows to do this or sleep in a reclining chair. Gentle rotation and gentle bending of your head and neck is permitted. Do not do any heavy lifting or straining (no weight greater than 10 pounds or 4.5 kg) for 2 weeks following your surgery. You should plan to be off of work for 2 weeks. If your job requires manual labor, lifting or straining then you should be off work for 2 weeks or limited to light duty.

DIET:

You may drink fluids and eat solid foods as you are able. Generally, patients experience a mild sore throat for 2-3 days following parotidectomy. This usually does not interfere with swallowing.

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:

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

* Difficulty breathing or swallowing
* Face or neck swelling
* Bleeding or saliva coming from the incision
* Elevated temperature (38ºC or 100.4ºF) and/or chills lasting more than 24 hours
* Foul smelling, yellow/green, purulent discharge (pus) coming from the incision
* Increasing redness and or swelling around the incision

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

The information contained on this sheet 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.