



Carolina Ear, Nose & Throat Head and Neck Surgery Center

Post-Operative Discharge Instructions for Parathyroidectomy

MEDICATIONS:

- *You will need to start taking calcium and vitamin D supplements within a few hours of waking up from your surgery. Please note that it is common for the calcium level to be low following removal of the parathyroid, and you may experience numbness or tingling, which is a sign of low calcium. If this happens, it should improve when you take your calcium supplements. If it does not, please call your doctor.*
- Please resume your pre-hospital medications. If you take blood thinners like Aspirin, Plavix or Coumadin check with your surgeon prior to restarting these medications. You should follow-up with your primary care physician regarding new prescriptions and refills.
- We will supply you with a prescription for a mild narcotic pain medication. You are not required to take it. If you do take it, please do not drive or drink alcohol as these in combination may make you drowsy. Most patients do not need strong pain medicine by the time you leave the hospital. Every day, try to decrease the total amount of narcotic medication given, by: increasing the time between doses, decreasing the number of pain pills used, or substituting plain acetaminophen (Tylenol) or ibuprofen (Advil) for the narcotic.

DIET:

- You may have temporary throat discomfort or difficulty swallowing. This is due to the surgery around your larynx (voice box) and esophagus (swallowing tube). These symptoms will gradually improve over the course of several weeks.
- Drink and eat foods that can be swallowed easily, e.g. juice, soup, gelatin, applesauce, scrambled eggs or mashed potatoes.
- You may be able to return to your usual diet in a couple of days.

ACTIVITY:

- Most patients are able to return to a full-time work schedule in 1-2 weeks; however this may vary according to your job. It may take longer to return to heavy physical or other demanding work, or shorter if you are feeling well. You may return to work when you feel up to it and can perform their job without significant discomfort.
- Do NOT drive a car until you are able to turn the neck side to side, which may take 1-2 weeks.
- Do NOT drive while you are taking narcotic pain medication.

INCISION CARE:

- Please leave the surgical glue in place on your incision and allow it to peel off on its own.
- You may shower 24 hours after surgery but please do not swim or soak in a tub for at least 2 weeks. After you finish showering, just pat your incision dry. Do NOT scrub with soap or washcloth for the first 10 days.
- You may elevate the head of your bed 30-45 degrees or sleep in a recliner at 30-45 degrees for the first 3 days to decrease swelling. The skin above the incision may look swollen after lying down for a few hours. This mild swelling at the incision site will go away in 4-6 weeks. The pink line will slowly fade to white during the next 6-12 months.
- Use a sunscreen (SPF#30 or higher) or wear a scarf for protection if in the sun for the first 6 months to a year as the sun can darken your scar.
- You may begin to use a hypoallergenic moisturizing cream (or Mederma, or other “scar” creams) along the incision after 2 weeks.

COMMON COMPLAINTS AFTER SURGERY:

- Numbness of the skin under the chin or above the incision is normal and should go away in a few weeks.
- You may feel a lump or pressure in your throat sensation when swallowing for a few days.
- Your incision may feel itchy while it heals. Avoid rubbing or scratching if possible.
- You may feel neck stiffness, tightness, a pulling feeling, mild aching chest discomfort, headache, ear pain or congestion. Take a mild pain medicine such as Tylenol or Advil. Put heat on the area using a hot water bottle, heating pad or warm shower.

- Some people prefer to sleep with an extra pillow for the first few days after the surgery, this helps keep swelling around your incision to a minimum.
- Your voice may be hoarse or weak. Pitch or tone may change. You may have difficulty singing. This usually goes back to normal over time but may take as long as 6 months to resolve completely.
- After surgery, you may notice a change in your mood, emotional ups and downs, depression, irritability or fatigue and weakness. These changes will get better as time passes.

FOLLOW-UP:

Please call your doctor to schedule a follow-up appointment if you have not already done so to set one up for approximately 1 week after surgery. You may also have a follow-up appointment with your referring doctor 2 weeks after surgery.

At the post-op visit the skin glue is removed and over-all recovery is assessed. The pathology report is reviewed. If everything looks good then subsequent follow-up is with the referring physician. The you may have a calcium level checked at 3 months post-op, 6 months post-op, and at 1 year post-op. Generally as long as the calcium level is normal a PTH level is NOT needed. If both the calcium and PTH levels are normal at 1 year, then you are considered cured.

CALL YOUR DOCTOR:

- For any questions, call your doctor's office at 828-322-2183
- Call your doctor if you have fever (temperature greater than 101.5), chills, lightheadedness, shortness of breath, difficulty breathing, nausea, vomiting, numbness or tingling in your fingers, hands, or mouth, muscle spasms, or if you notice signs of wound infection (redness, tenderness, or drainage from the incision).