

## **THYROID / PARATHYROID SURGERY** **Post Operative Instructions**

Nurse Line (8:30am to 5pm)                   **937-496-0261**  
After Hours Doctor Line                   **937-496-2600**

### **The Surgery Itself**

Thyroid or Parathyroid surgery involves general anesthesia, typically for one to two hours. Patients may be quite sedated for several hours after surgery and may remain sleepy for much of the day. Nausea and vomiting is occasionally seen, and usually resolves by the evening of surgery - even without additional medications. Some patients stay one night in the hospital and are discharged the next day. Other patients can go home the evening of surgery. Many patients will have a drain in place after surgery-this is removed the following day before you go home from the hospital or in the office 1-3 days after surgery.

### **Your Incision**

Your incision is closed with absorbable sutures and is covered with a small strip of tape or skin glue. You can shower and wash your hair as usual starting 24-48 hours after your drain is removed, as directed by your surgeon. If you did not have a drain in place after surgery, you may shower 24 hours after surgery. You may wash in a bathtub prior to that time if you are careful not to get your neck wet. Do not soak or scrub the incision. You might notice bruising around your incision or upper chest and slight swelling above the scar when you are upright. In addition, the scar may become pink and hard. This hardening will peak at about 3 weeks and may result in some tightness or difficulty swallowing, which will disappear over the next 2 to 3 months. You should apply sunscreen on your incision once directed by your surgeon (usually starting one month after surgery) EVERY day for the first year after surgery. This will prevent a red or pink scar and give you the best cosmetic result for your scar. A daily moisturizer with sunscreen (example Oil of Olay with SPF 15) is fine.

### **Limitations**

You can start resuming normal activities as tolerated 7 days after surgery. For some patients, lifting can cause pain and stretching at the surgery site for up to 3 weeks after surgery.

You should not drive or drink alcohol while taking pain medications. Most people can return to work/school in 1-2 weeks after surgery, but there may be physical limitations as far as what you may do while at work.

### **Medications**

- Pain medication should be used for pain as prescribed. Pain is expected after surgery. Your neck will be sore and pain will be worse when the neck is stretched and when you swallow. As the surgical site heals, pain will resolve over the course of a week. It is not uncommon for pain to get worse when you first go home because your activity may increase, but from that point on the pain should improve every day. Pain medications can cause nausea, which can be prevented if you take them with food or milk.
- You may be given a stool softener (Colace) because pain medications may make you constipated.
- You may be given Bacitracin ointment. If you are, it should be applied to the drain exit site three times a day for 2 days after the drain is removed. It should also be applied to the

drain site before and after your first shower after surgery. It is normal to have some red or pink drainage from your drain exit site for 1-2 days after it is removed. After the tape or glue is removed from your incision, you can place Bacitracin ointment on the incision 2-3 times a day for a week – just enough to keep it from forming scabs.

- If you were taking thyroid hormone tablets before your operation, you will continue this after surgery, but sometimes your surgeon will change the dose. If you were not taking thyroid hormone prior to your operation, your surgeon may prescribe these tablets following surgery if the entire thyroid is removed. During your post-operative visits, you may have a blood test to measure your levels of thyroid hormone and your dose of medication may be adjusted accordingly.
- If you had parathyroid surgery or a total thyroidectomy, you may be instructed to take extra calcium supplements until your blood calcium levels stabilize. These usually have to be purchased “over the counter” at a drug store and your surgeon will give you specific instructions. Generic brands are fine. Calcium carbonate with Vitamin D or TUMS are usually recommended. If you take any medications for gastric reflux (heartburn), you may be instructed to take Calcium Citrate with vitamin D instead of the other types of calcium. Your surgeon will instruct you on which type of calcium supplement to purchase and how many tablets to take each day after surgery.
- Take all of your routine medications as prescribed, unless told otherwise by your surgeon. Any medications which thin the blood should be avoided until your surgeon tells you to resume them. These include aspirin and aspirin-like products (Advil, Motrin, Excedrin, Alieve, Celebrex, Naproxyn). Patients who take daily blood thinning medications will be given specific instructions on when to stop and restart these medications.

### **Pain**

The main complaint following thyroid surgery is pain with swallowing and neck movement. Some people experience a dull ache, while others feel a sharp pain. This should not keep you from eating anything you want or moving your neck and will improve daily after surgery.

### **Voice**

Your voice may go through some temporary changes with fluctuations in volume and clarity (hoarseness). Generally, it will be better in the mornings and “tire” toward the end of the day. This can last for variable periods of time, but should clear in 8-10 weeks at most.

### **Cough**

You may feel like you have phlegm in your throat or a sore throat. This is usually because there was a tube in your windpipe while you were asleep that caused irritation that you perceive as phlegm. You will notice that if you cough, very little phlegm will come up. This should clear up in 4 to 5 days.

### **Hypocalcemia**

In some patients who have thyroid and parathyroid surgery, the parathyroid glands do not function properly immediately after surgery. This is usually temporary and causes the blood calcium level to drop below normal (hypocalcemia). Symptoms of hypocalcemia include numbness and tingling of your lips (like they fell asleep), in your hands and in your feet. Some patients experience a “crawling” sensation in the skin, muscle cramps or headaches. These symptoms can appear between 24 and 72 hours after surgery. It is rare for them to start more than 72 hours after surgery. If this happens, take 2 extra calcium tablets. If the symptoms do not resolve within one hour, you should call your doctor. If this happens during the business day, call the nurse triage line. If this happens in the evening or over the weekend, call the on call physician or go to the ER so your

blood calcium levels can be checked. You can take extra calcium supplements (which will help to resolve symptoms) as you are contacting the clinic or coming to the ER. Taking extra calcium supplements if you do not need them will not cause you any harm.

**Reasons to call your surgeon's office**

- Persistent fever over 101° F
- Increasing neck swelling
- Numbness or tingling around your mouth or fingertips
- Pain that is not relieved by your medications
- Purulent drainage (pus) from the incision
- Redness surrounding the incision that is worsening or getting bigger
- Bleeding is possible after surgery and the most serious cases may cause trouble breathing. Symptoms include rapid swelling in the neck, trouble breathing, red and purple discoloration of the skin over the incision. If breathing difficulty occurs with this rapid neck swelling, call the doctor immediately, go to the closest emergency room or call 911.