



Thyroidectomy Post-Operative Care

Expectations

- The area around the incision will have some swelling and bruising that tends to peak 3 days after surgery.
- It is common to feel swelling and fullness in the neck for several weeks after the surgery.
- The breathing tube used during surgery, can cause some irritation of the vocal cords. You may have a slightly hoarse or weak voice after surgery. This typically resolves after 1-2 weeks.

Activity

- Most patients can return to work 1-2 weeks after surgery; this depends on the nature of your work. It may take longer to return to more physically demanding work and less time if you do more sedentary work.
- You may begin driving when you can comfortably turn your neck from side to side and you are no longer taking narcotic pain medications (hydrocodone or oxycodone).
- Avoid exercise or athletics until you have seen your doctor post-operatively and you have been given the okay.
- Avoid heavy lifting (>10lbs).
- Bedrest is not necessary after surgery. Remaining active and mobile will help to expedite your recovery.

Diet

- Immediately after surgery, you will be started on clear liquids. If you tolerate this without nausea and vomiting, your diet will be advanced.
- It is common to have a temporary sore throat and pain with swallowing. This is related to the breathing tube used during surgery. You may need a softer or easily swallowed diet for a few days. You can return to your regular diet as tolerated.

Wound Care

- The dressing, if present, overlying your incision can be removed 24 hours after surgery.
- You may shower and get the incision wet 48 hours after surgery.
- Pat the incision dry when it gets wet.
- The incision may feel itchy and uncomfortable. Try to avoid rubbing or scratching the incision.
- The incision will initially look like a ridge of tissue. The manner in which the incision is closed, is done to promote a good long term result. This ridge of tissue gradually settles down and most patients have an excellent cosmetic result.
- If your surgeon used a liquid bandage you may shower the next day, but do not scrub the site. Pat it dry, do not rub, scratch or pick at the bandage. This bandage will slough off naturally in 5-10 days.

Medications

- You may resume your preoperative medications unless otherwise specified by your doctor.
- Pain is generally mild and thus ibuprofen and Tylenol are sufficient. Check with your doctor for the appropriate dosage.
- Pain control
 - o You have been provided with a prescription for a narcotic pain medication (hydrocodone/ acetaminophen or oxycodone/ acetaminophen). There are plenty of patients who never need to take this medication. It may be needed for the first few days or up to a week after surgery.
 - o This medication can cause constipation, so start a stool softener (Miralax, Colace, or Senokot) while taking this medication.
 - o Many patients only need ibuprofen or acetaminophen (Tylenol) after surgery for pain control. You can take 400 mg of ibuprofen every 8 hours.
 - o You can also use Tylenol or acetaminophen but do not take this if you are taking hydrocodone/ acetaminophen or oxycodone/ acetaminophen. The maximum daily dose of Tylenol (acetaminophen) is 3000mg from all sources.

Follow-up

You will be scheduled for a follow up 7-10 days after surgery. The pathology results from the surgery will be discussed at this appointment.

Call Lakeside ENT & Allergy at 585-394-8800 if you develop any of the following symptoms:

- Difficulty breathing or talking
- Excessive drainage or bleeding from the incision
- Excessive swelling of the neck
- Concern for infection with pain and redness at the incision site and/or fever >101.5
- Numbness or tingling of your fingers or mouth that does not resolve after 30 minutes