

Thyroid Surgery Perioperative Instructions

We would like to make sure all your questions are answered before your procedure. We previously discussed the risks, benefits and alternatives to having the procedure at your preoperative appointment, but please contact us if you have further questions.

In this informative video, Dr. Manning discusses the basics of thyroid surgery: https://www.youtube.com/watch?v=ZBr56F13UPE. If you would like to learn more, we would like to direct you to the trusted information at this website: http://www.entnet.org/content/patient-health.

• It is important for your care team to know about your medications. If you take any medications regularly, please write each one down. Include dose amount and how often medications are taken. Remember to bring this list with you to your procedure. Be sure to leave your medications at home.

If your health history requires it, do not forget to obtain written clearance for anesthesia from your PCP or appropriate physician. This would have been discussed at your preoperative appointment.

If your health history requires it, do not forget your pre-surgical testing at the surgery center. This would have been arranged at the time you scheduled surgery. You DO NOT have to fast for this work up.

Appointment date/time:	

• Illness can interfere with your procedure, so please let us know if you are experiencing any flu-like symptoms such as fever over 100F, chest congestion, wheezing, vomiting, diarrhea or ongoing cough with mucus (phlegm).

One Week Before Surgery

• For one week prior to the procedure, DO NOT take any medications that contain aspirin, ibuprofen or naproxen. Also stop herbal medications and supplements. Why? These medications interfere with blood clotting and may increase the risk of bleeding during and after surgery. Aspirin is in several overthe-counter medications, for example: Anacin, Pepto-Bismol, and Alka-Seltzer Cold. Ibuprofen is in medications such as Advil, Motrin and Pediaprofen. Naproxen sodium is found in Aleve. Some supplements and herbal medications such as omega 3, flaxseed oil, fish oil and gingko may also increase risk of bleeding. Check with your pharmacist or refer to information provided about the content of medications.

For pain or fever, you can take acetaminophen (Tylenol) or the pain medication prescribed by your doctor, **but not both.** Acetaminophen does not increase the risk of bleeding, but too much can be harmful to your body. Many prescription pain medicines including Norco, Vicodin, Percocet and Tylenol with codeine contain this ingredient. Be sure to check the contents of your prescription pain medications.

- If you have been prescribed a blood thinner by another physician for a health condition, be sure to speak to them about when to stop/restart these or an alternate plan.
- Make arrangements for your post-operative care. As you prepare for your procedure, we encourage you to identify a care plan partner to support you during your recovery. It is important to have someone to help you for at least the first 24 hours after your procedure.

You'll appreciate having a family member or friend help you at home after surgery to assist with routine activities like cooking, bathing and transportation. If you are unable to get assistance, please let us know.

Smoking or using tobacco products can cause problems during and after your procedure. We want
your recovery to be as smooth as possible, so please stop these behaviors now. If you need help
stopping, please speak with your primary care doctor.

Before Your Procedure

Driving after Your Procedure

We don't want you to drive after your procedure, so please make arrangements for someone to drive you home after you have been discharged. You must also wait at least 24 hours after you have had anesthesia to resume driving.

Driving may resume as soon as you are no longer taking prescription (narcotic) pain medication, you are comfortable, have the ability to turn your head from side to side and are able to control your vehicle in the event of an emergency.

• It's important to stay well hydrated after your procedure so go ahead and stock up on items you will need. We recommend that you eat or drink whatever feels most comfortable after your procedure. Most find that clear fluids and soft foods are the most easily tolerated during the first 24 hours. Liquids such as water, apple juice and ginger ale are fine. Acidic liquids (orange juice, lemonade) can upset your stomach, especially if you are not eating a regular diet.

Did you know that drinking lots of fluids will actually help speed up your recovery and reduce your discomfort? It may feel difficult to swallow at first, but the more you drink and swallow, the less pain you will have.

The Night Before Your Surgery

Don't eat or drink anything after midnight

It's important to not eat or drink ANYTHING after midnight unless we have advised you otherwise. This is to prevent you from vomiting when you are put to sleep, which could cause a problem in your lungs and elsewhere. You can take your usual medications with a sip of water unless your prescribing doctor(s) has told you otherwise. Nothing to eat includes mints, candy, cough drops and gum. Even a nibble can cancel surgery.

If your procedure is after noon, you may have plain liquids up to two hours prior to arriving for your procedure. This includes black coffee, chicken broth, Gatorade, apple juice and plain Jell-O (no fruit, etc. added in).

Day of Surgery

•	Someone from our office will call you a day in advance to advise you on when to arrive for your
	surgery. Bring reading material if you would like as your arrival time will be a couple of hours before
	your surgery.

Surgery date/time: _	
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Things to bring with you to your procedure

- In addition to your medication list, bring any inhalers that you use, a case for eyeglasses or contacts, your insurance card and enough money for any co-payments and/or prescriptions. If you have a social security card or number, bring either with you as well. DO NOT BRING your medicines (except inhalers), jewelry (a wedding ring is OK), credit cards or large amounts of money.
- It's common to have a low-grade fever during the first week of recovery. However, if you feel feverish and your temperature is 102F or greater (oral thermometers are the most accurate), let us know as soon as possible.
 - It's common to feel "down" a few days after a procedure. This may last for a few hours or a few days, and you may feel emotionally exhausted. Don't worry, this is a normal response and it will go away as you recover.
- You will have steri-strips covering your incision site and subcutaneous sutures. The sutures will dissolve
 on their own, but the steri-strips must be left in place until they begin to fall off on their own or are
 removed at your post-operative appointment. You may trim steri-strips if they begin to curl at the
 edges.

24-72 Hours After Your Surgery

• Now that the procedure is behind you, let's focus on keeping you comfortable and working toward a strong recovery. You're probably feeling uncomfortable today, but it is important to get up and move

around a bit (following our instructions) at least three times each day. Movement helps to prevent blood clots and preserve your muscle strength.

- <u>If prescribed</u>, take your thyroid hormone medication as directed when you go home. Thyroid medication should be taken on an empty stomach. Thyroid medication and calcium supplements should be taken one to two hours apart.
- If prescribed, take calcium supplements as directed. It is common for your calcium level to be low following removal of the thyroid as the glands that produce calcium may have been temporarily stunned.

You may experience numbness and tingling of fingers, toes or mouth, unusual facial movements and/or cramping of the fingers or toes if your calcium is low. It should improve when you take your calcium supplement. If it does not, please let us know.

Pain management

Many patients experience some pain or discomfort after surgery, which may affect how they eat, drink or sleep. There may also be some throat discomfort from the breathing tube used during anesthesia. The degree of pain will vary during recovery and can last up to 14 days following surgery. You will be prescribed pain medication that can be administered every four to six hours for the first few days after surgery. We recommend you transition to over-the-counter Tylenol after a few days, using prescribed pain medication for breakthrough pain only.

Constipation and nausea are common side effects of narcotic pain medicine. Stool softeners, a high fiber diet, apple juice or prune juice and drinking plenty of water help prevent constipation. Taking your narcotic with food helps decrease nausea.

- You may shower/bathe 48 hours after your surgery. DO NOT soak in a tub or swim for two weeks. After you have finished showering, pat the incision dry. DO NOT scrub the incision area with soap or washcloth for the first 10 days.
- Some patients may experience nausea and/or vomiting from the general anesthetic during the first 24-36 hours following surgery. Let us know if nausea/vomiting is experienced for more than 6 to 12 hours.

Two Weeks after Surgery

Generally, it takes 7 to 10 days to recover after thyroid surgery. However, some patients may feel
better in just a few days while others may take up to two weeks to recover. You should take it easy for
the first week after your procedure, gradually resuming normal activities. Do not engage in strenuous
activities such as sports and exercise for at least two weeks.

We do NOT recommend that you travel long distances the first two weeks, as this is when issues may arise. It makes sense for you to be able to get back to us quickly in case you have any problems following your procedure.

- **Do not lift anything over 20 pounds**, including a child, for the first two weeks following your procedure. The strain of lifting puts pressure on blood vessels in the process of healing, causing them to re-open and bleed.
- Mild swelling, a raised appearance to the incision site and some redness around incision site is to be expected as this is a normal healing response after surgery. This will improve over the next four to six weeks. The incision site will likely turn pink and then slowly fade over the next 6 to 12 months.

If you have increasing redness, redness that spreads or redness with pain, please let us know. If you have rapid swelling at the incision site and increased/darkening redness, please seek immediate medical attention as you may have developed a hematoma.

- You may experience a sore throat, difficulty swallowing, a lump or pressure sensation in your throat, hoarseness, a change in the pitch of your voice and/or difficulty speaking at loud volumes. These symptoms should gradually improve over the next several weeks.
 - During the week following your procedure, you may eat less than usual. This can result in temporary weight loss which will likely be regained after you start eating normally again. Try drinking and eating foods that can be swallowed easily such as juice, soup, applesauce, scrambled eggs and mashed potatoes. Be sure to continue to drink plenty of fluids to remain well hydrated.
- You may also have some numbness above the incision and under chin. There can also be some tenderness around incision site as the numbness fades. You may also feel some stiffness, tightness, or pulling sensation in your neck. This generally improves over the next few weeks.
- Although rare, it's important to be aware of symptoms that require urgent care. If you suddenly have trouble breathing, have pain while breathing deeply or start coughing blood, call 911 or go to the nearest emergency room.

Post-Operative Appointment (one week after procedure)

• We look forward to seeing how well your recovery is going since your procedure. Please don't forget your already scheduled follow-up appointment in our office. If you don't remember the date, please let us know 479-750-2080.

Fol	low-up	appoi	intment d	ate/time:	

- We will have your thyroid function bloodwork checked six weeks after your procedure. This can be
 done at our office or at your PCPs office, whichever is more convenient for you. If you have it checked
 at your PCP's office, please have them forward a copy of the results to us for your chart. Our fax
 number is 479-750-2082.
- You may be able to return to work one to two weeks after your procedure; however, this may vary according to your job duties. It may take longer to return to heavy physical or other demanding work.

• After two weeks, we recommend you gently apply sunscreen (SPF 30 or higher) or cover incision site when exposed to sun, as the sun can darken your scar. Continue sun precautions for 6 to 12 months.

If you need to communicate with your Care Team directly during business hours, please call our main phone number 479-750-2080. If at any point you need urgent medical attention, please call 911 or go to the nearest emergency room.