

Parotidectomy Post Operative Instructions

HOW YOU WILL FEEL

You will be drowsy and tired following surgery due to the medicines we have given you to make you comfortable. Most people wake and doze on and off during the evening after surgery. The day following surgery, you may still feel a bit tired, but you will soon regain your energy. You may move about normally without fear of disrupting your surgery. Your energy will return more rapidly if you do.

IF YOU HAVE NAUSEA

Although we give anti-nausea medicines before, during and after your surgery, it's still not unusual to have some nausea following surgery. Relax, decrease your activity and don't eat any heavy foods—just try some clear liquids. All nausea should be over 12-24 hours following surgery.

DISCOMFORT

You may have some discomfort around your incision and neck. Usually, this is due to muscle soreness. We've given you a pain medicine to be used as directed. Take a pain pill before going to sleep the evening of surgery (preferably after you have kept something in your stomach). Take another pain pill the morning following surgery since you may feel a bit stiff and uncomfortable when you begin to move about. After two days, extra strength Tylenol may control your discomfort instead of the narcotic.

SWELLING

You may expect some swelling and discoloration around your neck if you had a neck incision. This swelling will increase overnight. To reduce swelling, you may gently apply an ice pack to the surgical incision during the first 48 hours following surgery. If possible, sleep with your head elevated on two pillows. Most of your swelling should subside over 4 to 5 days.

FEVER

Fever of up to 101 F. following surgery is common. Please call us should your fever reach 102 F.

ANTIBIOTICS AND INFECTIONS

You received antibiotics in your IV prior to surgery. You may be given antibiotics to continue after surgery as well. Infection after parotid surgery is very rare, but if you notice increased redness or swelling accompanied by tenderness or fever at any time, please call us so that we may examine you.

ACTIVITY

You may resume light activity as you start to recovery from surgery. You should avoid any heavy lifting or straining for at least a week after surgery. Strenuous sports should be avoided for at least 2 weeks. This is to prevent increase in swelling or bleeding in the surgical area. You may return to work when you feel ready. Generally, you can return to work in 7-14 days.

DIET

There is no diet restriction after surgery. You can advance your diet as tolerated to regular based on your stomach and any neck and jaw pain that may be present.

DRESSINGS

You will have your incision closed with either stitches or Dermabond tissue glue. If you have Dermabond, there will be no stitches to remove. The Dermabond usually peels off 7-10 days after surgery.

DRAIN

In most instances, a drain is placed post-operatively to help drain blood and saliva from the wound. If you have a drain, you will be instructed on caring for it by the nurses at the hospital. You should record the daily output and inform your physician how much has come out when you return to the office to have it removed. You will need a follow up appointment in the office 2-3 days after surgery for drain removal.

PERSONAL HYGIENE

You may shower or bathe as usual once the drain is removed. Please clean around the incision and keep the surgical site clean. You may use soap and water. Take care to treat your incision gently.

NUMBNESS

You will have some numbness around your incisions, cheek and ear. The sensation around your cheek will return within a few weeks to months. The numbness around your ear lobe may be permanent but will improve slightly over time. This does not usually pose a problem but can be aggravating.

FACIAL WEAKNESS

We use nerve monitors and very gentle technique during your surgery. However, it is possible to have some temporary nerve weakness in your face after the surgery. Generally, this occurs around the corner of the mouth. It is usually very mild and returns within a few weeks. It is rare to have any permanent facial weakness. Weakness of the eye muscles can lead to the most problems with inability to close the eyelids. If you are unable to close your eyelids, you will need to take precautions to keep your eyes from drying out. This includes using artificial tears during the day, placing an eye ointment in your eye at night, and taping your eye closed at night to keep it moist. Although this is extremely rare, any permanent facial weakness can be remedied by adjunctive procedures.

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OTHER PROBLEMS

Other problems to look for are Frey's Syndrome. This is where you sweat along your cheek when you get hungry or eat. Hematoma or seroma is a collection of blood or fluid under the skin. This requires immediate attention and drainage to avoid further complications with healing. Keloid formation can occur in persons prone to these problems, such as dark skinned individuals. Asymmetric ear lobes can occur depending on how your incision heals.

Follow Up

You will need to be seen in the office 2-3 days after the surgery for drain removal. If you do not have a drain, you can follow up in 1 week. This appointment should have been made by your doctor's **Surgery Coordinator** at the time of scheduling the surgery. If you are unsure if you have a post operative appointment scheduled, please reach out to your doctor's **Surgery Coordinator** to verify your post operative appointment.

WHAT SHOULD I CALL THE DOCTOR FOR?

- Fever over 102 F that **DOES NOT** respond to Tylenol or Motrin. The fever may go up and down but if it does decrease with Tylenol or Motrin, it is OK to monitor.
- Sudden increase in swelling of the neck incision.
- Difficulty breathing.