



POST-OP THYROIDECTOMY INSTRUCTIONS

FLUIDS: It is very important to remember to stay hydrated after surgery.

DIET: There are no diet restrictions after the surgery. You may eat anything you can tolerate.

ACTIVITY RESTRICTIONS AND RETURNING TO SCHOOL/WORK: Typically at least 5 days is needed to recover, but 7-10 days is preferable if possible. You should limit straining, lifting, and bending over for the first week as this will increase the risk of bleeding. People with a sedentary job not requiring a lot of strain may return sooner. It is important to move your head side-to-side several times each day to prevent muscle stiffness.

DRAIN: You will have a drain that comes out of a small incision below the surgery site. This is there to remove fluid that builds up under the skin. Your nurse will give you instructions and guidance on taking care of the drain at home. You will need to be seen in 1 to 2 days in the office to have it removed.

SHOWER/BATHING: You may shower any time after surgery. Let warm soapy water run over your incision. Do not submerge the incision in water. Do not rub or scrub the incision. When drying – do not rub – just pat the wound gently with a clean towel.

MEDICATIONS: The typical medications given after surgery are –

- **Pain medicine** – Typically you will be prescribed Lortab (hydrocodone/acetaminophen) or Percocet tablets (oxycodone/acetaminophen). You should not drive or go to work while using Lortab or Percocet. If the pain is mild, you may use over the counter medications such as ibuprofen (Advil) or acetaminophen (Tylenol) and you may return to work.
- **Antibiotic:** You may be given a prescription for an antibiotic to prevent an infection while you are healing, but this is not always necessary.
- **Ointment:** Please apply ointment to the incision 2-3 times per day after your dressing has been removed by your doctor.
- **Calcium:** After having thyroid surgery you may be instructed to take a calcium supplement. If you begin to experience tingling, numbness, or muscle twitching in the hands, feet, or face, call our office for instructions on how much calcium to take.

FOLLOW-UP: Each patient who undergoes surgery should be seen in our office within 1 to 2 days to have the drain removed; and within 14 days after surgery to check thyroid function. These appointments should be scheduled at the time you scheduled your surgery, but if this was overlooked, please call the office to schedule this visit.

SCAR CARE: To help improve the final outcome of the scar you can do several things if desired. First, keep the ointment on the incision at all times for the first two weeks to keep it moist and clean. After two weeks you could begin to use vitamin E oil or creams that should be massaged into the scar area twice a day. You could also consider over-the-counter silicone gel sheets, roll on films, or the product Mederma. All of these things will help with scarring if used daily for at least 3 months; however, up to 12 months would be more effective.

NUMBNESS: It is likely that an area around the wound will be numb or have a change in sensation. This is normal and unavoidable. It will improve over weeks to months, but in some cases it never feels exactly the same.

MUSCLE WEAKNESS: This is a rare and unlikely problem after surgery, but in some cases a nerve that controls muscle function will be irritated during surgery and cause a temporary weakness. If this occurs the weakness may exist for several weeks and in rare cases last for months or permanently. Again, this is rare and if it happens you should contact the doctor to discuss it as soon as it is noticed.

QUESTIONS OR PROBLEMS: Should you have any concerns, questions, or problems during your post-operative recovery period, please do not hesitate to contact the office at **208-656-9646 during business hours**, or **208-419-3254 after hours**. If unable to reach our nurse on call, please go to Madison Memorial Hospital ER and they will page your doctor.