



NECK SURGERY

Postoperative Issues

1. Pain

Most patients will experience mild to moderate pain for 1 – 4 weeks after the surgery. Prescription pain medications may be needed for some or all of that time. A prescription will be given at the “pre-op” visit. Mild discomfort may be treated with Tylenol. Please avoid any ibuprofen-based pain medications (**Motrin or Advil**), as well as aspirin, as these can lead to postoperative bleeding.

2. Diet

Some patients may have mild nausea and even occasional vomiting for one to two days following general anesthesia. Once this subsides, the patient can usually eat a normal diet. There may be some soreness with swallowing due to inflammation of the neck and throat muscles, or from the breathing tube used during general anesthesia. This should resolve over 1 – 2 weeks.

3. Activities

It is best to avoid strenuous activities for approximately two weeks following surgery. Significant exertion will raise the blood pressure, again increasing the chance of bleeding. It is also best to avoid bending over, as this will increase blood pressure to the head and neck. Most will find it more comfortable to sleep slightly upright for at least the first few days after surgery.

4. Bleeding

Minimal if any bleeding may be seen at the skin suture line for several days following the surgery. Bleeding may also occur under the skin (called a hematoma), and lead to a sudden increase in swelling at the operative site. If you were discharged to home with a drain still in the neck, bleeding under the skin may lead to a sudden increase in output from the drain, in particular red or dark red blood as seen in the drain collection bulb. Severe or prolonged bleeding, either through the suture line or under the skin, should always be reported to your doctor.

5. Fever

A low-grade temperature (100.5°F or less) is not unusual following surgery. Higher temperatures may be treated with Tylenol. Again, avoid any ibuprofen-based medications (Advil or Motrin), as these may affect bleeding. High fevers (greater than 102.5°) should be reported to your physician.

6. Antibiotics

Following surgery you may be prescribed an antibiotic medication. All prescribed antibiotics should be taken as directed until completed.

7. Warning Signs

Please call your physician if any of the following occur:

- Severe or prolonged bleeding (see 4 above)
- Fever over 102.5° (see 5 above)
- Prolonged nausea or vomiting (see 2 above)
- Difficulty breathing
- Difficulty swallowing
- Redness and tenderness of neck skin
- Increased neck swelling
- New rash

8. Wound Care

The doctor or nurse will give you specific instructions for bandage care. We recommend that incisions be kept dry for 48 hours after surgery. An antibiotic ointment such as Bacitracin should be placed on the incision site at least once a day 24 hours after surgery. Peroxide may be used to clean the incision site after 48 hours. The hospital will give instructions on the care of any surgical drains.

9. Follow-up

The doctor will let you know when to follow up at the time of release from the hospital if you require at least an overnight stay. The hospital does not typically make the arrangements so you, a friend or a family member should call for an appointment upon release. If the surgery is a planned outpatient procedure, the doctor will let you know when to follow up at the "pre-op" visit. Typically, surgical drains stay a few days and sutures and/or staple are removed after one week.

10. Contact

In case of an emergency please contact (830) 627-3777.

11. Smoking

DO NOT SMOKE, it prevents proper healing in the neck.