



PAROTIDECTOMY

Parotidectomy is done under general anesthesia through an incision that courses just in front of the ear and into the neck. This incision heals well with minor scarring and provides safe access to identify the facial nerve and remove all tumor tissue. The incision is usually closed with nylon sutures that are removed 4-6 days after surgery. A drain is also placed which exits the wound behind the ear. This is removed in clinic 1-2 days after surgery. Patients are sometimes admitted into the hospital for an overnight stay to ensure safe post-operative management.

BEFORE SURGERY: No aspirin, Motrin, Ibuprofen, Advil, Nuprin or any other anti-inflammatory medicine for one week before and one week after surgery. Also avoid Vitamin E, herbal supplements, herbal teas, and red wine for one week prior to surgery. Tylenol is permitted at anytime. If you take Coumadin or other blood thinners please discuss this with your surgeon. Please do not eat or drink anything after midnight the night before surgery, but you may take any prescription medicines the morning of surgery with a sip of water. The hospital or surgical center will call you the day before with time and instructions for surgery. Make arrangements for a ride home after surgery.

PAIN: Pain can be mild to moderate for the first 24-48 hours after surgery, and usually declines thereafter. The skin around the surgery area is usually numb after the surgery, reducing the pain. Take the pain medications as directed by your physician.

WOUND CARE: Clean the wound with hydrogen peroxide using a cotton swab twice each day. Apply antibiotic ointment to the wound 2-3 times a day. Empty the drain bulb at least 3 times each day (and every time it fills) and record the output. Once the sutures are out, you may wash the wound with soap and water and gently dry the area. Your ear and cheek will be numb for several months after surgery, and possibly permanently. Three weeks after surgery, you may begin to massage the wound using vitamin E or aloe containing lotion and oil. This will soften the scar over time.

EATING: Expect to eat a liquid and soft diet for the first few days after surgery. Chewing may be uncomfortable due to irritation of the masseter muscle that lies below the parotid gland and the cheek. Chewing on the opposite side will help.

EYE CARE: The nerve controlling the closure or blink of the eye may be weak for several weeks to months. If the blink is slow or eye closure is incomplete, then the cornea may dry out or become infected. This can lead to scarring and

possibly blindness. Applying a thin film of Lacrilube to the eye when it feels dry or itchy will keep the eye moistened. This should be applied at least 3 times a day. Artificial tears are helpful during the day, every hour or two. Always wear glasses or sunglasses when outside. Taping the eye shut at night is often helpful, but take care to never let the tape touch the eyeball.

ACTIVITY: Avoid all strenuous activities, e.g. heavy lifting, sports, etc., for at least 2-3 weeks following surgery.

WHEN TO CALL THE DOCTOR:

- Excessive bleeding or swelling
- Signs of dehydration
- Any blindness, vision decrease or eye pain
- Uncontrolled pain

RISKS:

- Bleeding—please do not take aspirin or Motrin (Advil or Ibuprofen) for one week before or one week after surgery.
- Infection leading to skin loss
- Facial nerve injury, with temporary or permanent facial weakness or paralysis of all or part of the face. Permanent paralysis would require further surgeries. Dyskinesia (inappropriate motion of the facial muscles) may occur if nerve function returns.
- Depression on side of face
- Numbness of ear and neck on side of surgical procedure—most people have this at least on the lower ear.
- Frey's syndrome—sweating on the face when eating which is usually not noticed until about a year after surgery. Every patient gets at least a small amount of this.
- Salivary fistula—leak of saliva to skin
- Seroma—fluid collection under the skin, which may require drainage.
- Return or incomplete removal of the tumor
- Damage to the eye with permanent visual loss or blindness if the eye is not protected if the facial muscles are weak or paralyzed.

FOLLOW UP APPOINTMENTS ARE IMPORTANT. PLEASE CALL OUR OFFICE AT 801-328-2522 TO SCHEDULE AN APPOINTMENT AS DOCTORS' SCHEDULES DO FILL UP QUICKLY.

Please schedule your appointment between 1-2 days from surgery for drain removal and another appointment 4-6 days from surgery for suture removal.