

Instructions Following a Thyroidectomy or Parathyroidectomy

Thank you for allowing the Thyroid and Parathyroid Surgery Center of New Jersey to serve you for your health care needs. We know you had a choice in where to have your surgery and we're glad you chose us.

This information is to help answer some of the questions you may have about your operation and to give you instructions to follow during your recovery period. If you have any other questions, please ask them.

Activity:

- For 24 hours: Limit your activity for the next 24 hours and get plenty of rest.
- For 1 week: No heavy lifting or pushing, active sports, strenuous exercise, or heavy household work to reduce the risk of bleeding. Objects that cannot be lifted with one hand are considered too heavy. You may walk and do light household activities.
- You may plan to return to work in 1-2 weeks, or as instructed.

Medications:

- Calcium: If you had your whole thyroid removed, or had parathyroid surgery, you may be given calcium. Take this as directed. Be sure to finish the calcium and do not stop before you are scheduled to. If you experience numbness or tingling of your lips or fingers, take additional calcium until it resolves. You may take 2 pills every 30 minutes until resolution. If it doesn't get better, email or text your doctor.
- Synthroid: If you had your whole thyroid removed, you will be given Synthroid (thyroid hormone replacement). The proper dosage will eventually be determined by your primary care physician/endocrinologist by gradual adjustment which may take several months.
- Discomfort: you can expect to have some pain the first 24 to 48 hours, especially with swallowing. Take your prescription pain medicine as often as needed for pain. If you find the narcotic too strong, you may take half of a pill or switch to Tylenol 1000mg every 6 hours (The narcotic medication also includes Tylenol and you must not exceed more than 4000mg in 24 hours). Some discomfort may persist for up to 1 week.
- Do not drive or operate heavy machinery while taking your prescription pain medication. It may make you drowsy. Again, you may substitute Tylenol for your prescription pain medicine. If in doubt ask your doctor or a pharmacist.
- Do not take aspirin, ibuprofen, naproxen or over the counter medications containing these medications for two weeks.
- Nausea: anti-nausea medications will be provided. Avoiding heavy foods in the first 24 hours can help reduce post-operative nausea but take the anti-nausea medications as directed. Vomiting after surgery is not only uncomfortable, it can cause bleeding.
- You should resume taking all other medications the day after surgery except as noted by your doctor.

- If you were on any blood thinners (Plavix, Coumadin, Etc.) generally you should not take these for 1 week following surgery, unless instructed otherwise.

Diet:

- You should not have a heavy meal on the evening of surgery because of the effects of the general anesthesia. It is best to limit intake to soups and clear liquids.
- You may resume your previous diet as tolerated the day after surgery with no additional restrictions or changes.

Wound Care:

- You may shower as usual as soon as you like after surgery. Do not scrub the incision but it's okay to get it wet. Do not soak the incision or bandages. Do not pick at or remove the skin glue until at least 3 weeks after surgery. If the glue is still there at 3 weeks, you may remove the Band-Aid (Steri-Strip) and the rest of the glue. If it comes off early, simply keep the area clean and dry.
- You can expect some pain when swallowing or hoarseness for the first 2 or 3 days. If it lasts more than 3 or 4 days or is severe, email or text your doctor.
- You can expect some minor swelling at the surgical site, particularly above the incision. This resolves in the coming weeks to months. You may also have some clear discharge from the incision which is not alarming. Please text or email your doctor if you have any questions about changes to your wound.

Email or text your doctor (or go to the emergency room) if you have:

- A fever over 101.5 F that doesn't improve with Tylenol
- Pain not relieved by your pain medications
- Any active bleeding
- Any trouble breathing
- A large amount of swelling under the incision or elsewhere in the neck
- Numbness or tingling in your hands or feet, or around your lips that doesn't get better after taking several additional doses of calcium
- Cramping or spasms in your hands or feet

Follow Up:

Your surgeon will call you a week or two after surgery with the results of the pathology, and you will be scheduled to follow up in the office roughly 1 month after surgery. You will also need to be seen by your referring doctor roughly 4 weeks after surgery, although this varies on the doctor.

If you had parathyroid surgery, and are not following up in our office, please note that we need your referring endocrinologist to send us your postoperative lab results, which should not be done while you are on calcium. Your postoperative PTH may remain elevated, but as long as your calcium has normalized that indicates a successful surgery.