

Patient Education

Otolaryngology - Head and Neck Surgery Center



Parotid Surgery

How to prepare and what to expect after

The *parotid* gland is one of the glands that secretes saliva. Your doctor will remove either part of your parotid gland (called a *superficial parotidectomy*) or the whole gland (called a *total parotidectomy*). The type of surgery done depends on your diagnosis.

This handout explains how to prepare for your operation and what to expect afterward.

How to Prepare for Your Operation

Things to Remember

- Do **not** take any aspirin or other products that affect blood clotting for 1 week before your operation. Two of these are ibuprofen (Advil, Motrin) and naproxen (Aleve, Naprosyn). See attached sheet for more information.
- Do not shave any part of your body that you do not already shave every day.

24 Hours Before Your Operation

- **Take 2 showers:** Take 1 shower the night before, and a second shower the morning of your operation. Use the antibacterial soap your nurse gave you to wash your body.
- Do **not** use the antibacterial soap on your face and hair. (See directions that came with the soap.) Use your own soap and shampoo on your face and hair. Use clean towels to dry off, and put on clean clothing.
- **Arrival time:** The pre-surgery nurse will call you by 5 p.m. the night before your operation. If you are having surgery on a Monday, the nurse will call you the Friday before. If you do not hear from the pre-surgery nurse by 5 p.m., please call 206-598-6334.

The pre-surgery nurse will tell you when to come to the hospital and will remind you:

- Not to eat or drink after a certain time
- Which of your regular medicines to take or not take
- To sip only enough water to swallow your pills

- **Heating blanket:** To reduce your risk of infection, you will be covered with a heating blanket to warm your body while you wait to go into the operating room. Ask for a heating blanket if you do not receive one.

What to Expect After Your Operation

Your Hospital Stay

You will spend about 1 to 2 days in the hospital, most likely on 4-Northeast or 4-South. Visiting hours are 5:30 a.m. to 9:30 p.m.

Intravenous Line

You will have an *intravenous line* (IV) in your arm to give you fluids during and after surgery. This will be removed when you are able to drink liquids.

Drain

You may have a drain to remove fluids that build up in your skin after surgery. The drain will be removed 1 to 2 days after surgery.

Incision

Your incision will be in front of your ear and extend down to your neck or behind your ear. It will be closed with sutures.

It is important to keep the incision area clean. Your nurses will clean your incision with a solution that is half-strength normal saline and half-strength hydrogen peroxide. Then, they will put an ointment on your incision. This cleaning will be done 2 to 3 times a day.

After you go home, you or your helper will need to keep doing this incision care until your sutures are removed.

Your sutures will likely be removed at your clinic visit 5 to 7 days after surgery. Your incision will be red and raised. In most cases, it will flatten and fade in about 6 months.

Protect your incision with sunscreen starting about 2 weeks after your surgery. Keep using sunscreen on your incision for 12 months.

Pain Medicine

You will be given oral pain medicine. You should have little discomfort. It is common to have a sore throat and a hoarse voice after surgery. This may last for a week or more.

Questions?

Weekdays from 8 a.m. to 5 p.m., call the Nurse Voice Mail Line at 206-598-7535.

Your call will be returned as soon as possible.

After hours and on weekends and holidays, call 206-598-6190 and ask for the Otolaryngologist on call to be paged.

Eating

You will probably be able to eat and drink normally the evening after surgery. You may feel a little queasy from the anesthesia.

Activity

After the anesthesia wears off and you are feeling up to it, you will be able to get up and walk. Moving around will help both your lungs and your circulation. Avoid heavy lifting, straining or activities that may increase your blood pressure for 2 weeks after surgery.

Return to Work

Patients who have this surgery usually return to work in 1 to 2 weeks.

Call the Clinic Nurse or the Doctor on Call If You Have:

- Signs of infection in your incision:
 - Redness
 - Swelling
 - Increased pain
 - Foul-smelling or watery discharge from your incision
- A fever higher than 101.5°F (38.6°C)
- Bleeding from your incision
- Rash or itching
- Ongoing nausea or vomiting

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