



## 有疑問嗎？

在工作日早上 8:00 至下午 5:00，撥護士語音信箱專線，電話號碼為 206-598-7535。

相關人員將會儘快回覆您的電話。

在工作時間以外及週末和節假日，請撥 206-598-6190，聯絡當值的耳鼻喉科醫師。

## 甲狀腺激素

根據您的手術情況，術後，您可能需要每天服用甲狀腺激素。您的外科醫師將會為您開具第一個藥方。請拜訪您的初級護理醫師或者內分泌醫師（專門研究激素的醫師），瞭解隨診時的血液檢查結果，以便查看您的甲狀腺激素水準，因為您的服藥劑量可能需要據此作出相應調整。

## 重返工作崗位

接受此類手術的大部分病人均可以在大約 1 到 2 週後重返工作崗位。

## 需要致電醫師的情況

如果您出現下列情況，請致電護士或醫師：

- 切口呈現出任何感染跡象：
  - 發紅
  - 腫脹
  - 疼痛加劇
  - 惡臭味排泄物
- 發燒，體溫高於 101°F (38.3°C)
- 出血
- 噁心和嘔吐
- 口腔、指尖或腳趾周圍出現刺痛感

UW Medicine

UNIVERSITY OF WASHINGTON  
MEDICAL CENTER

Otolaryngology –  
Head and Neck Surgery Center  
Box 356161  
1959 N.E. Pacific St. Seattle, WA 98195  
206-598-4022

© University of Washington Medical Center  
Thyroidectomy or Partial Thyroidectomy  
Chinese  
Pub. 05/2002, 04/2011  
Rev. 04/2011

Reprints on Health Online: <http://healthonline.washington.edu>

## 患者教育

耳鼻喉科 — 頭頸外科中心



# 甲狀腺切除術 或甲狀腺局部 切除術

## 術前準備工作以及術後注意事項

甲狀腺切除術或者甲狀腺局部切除術旨在摘除您的全部或部分甲狀腺。本印刷資料講解了術前準備工作和術後注意事項。

## 準備工作

### 術前

- 在您接受手術前 1 週內，請勿服用阿司匹林或者影響血液凝固的其他產品。布洛芬 (Advil、Motrin) 和萘普生 (Aleve、Naprosyn) 都屬於影響血液凝固的藥品。請參閱附表，瞭解更多資訊。

### 接受手術前 24 小時

- **到達時間：**術前護士會在您接受手術的前一天下午 5:00 之前與您取得電話聯絡。如果您正好在週一接受手術，則護士會在前一個週五給您打電話。如果您在下午 5:00 仍未接到護士的電話，請撥 206-598-6334。

UW Medicine

UNIVERSITY OF WASHINGTON  
MEDICAL CENTER

術前護士將告訴您何時到達醫院，以及辦理登記手續的地點。此外，術前護士還將提醒您：

- 在特定時間之後不要進食或飲水
  - 需要服用或者不服用哪種常規藥物
  - 只喝一小口水，足夠吞嚥藥丸即可
- **進行 2 次淋浴：**手術前一天晚上進行 1 次淋浴，手術當天早上進行第 2 次淋浴。使用護士給您用於清洗身體的抗菌皂。
- 請勿在將抗菌皂用於清潔臉部和頭髮。（請參閱隨抗菌皂所附之說明書。）使用您自己的香皂和洗髮露清潔臉部和頭髮。使用乾淨的毛巾將全身擦乾，並穿上乾淨的衣服。
- **加熱毯：**為降低您感染的風險，您將需要被包裹上一床加熱毯，以便在您等待進入手術室的那段時間裡使身體保持溫暖。如果您沒有收到加熱毯，則請要求相關人員給予您一床。

## 後注意事項

### 住院時間

大多數病人會在接受手術後當天晚上和第二天留在醫院。探望時間是早上 5:30 至晚上 9:30。

### 切口護理

您的頸部根處將會有一個切口。醫師會使用手術縫合線（縫線）為您縫合該切口。

保持切口部位的清潔，至關重要。如果醫師使用膠條（狹窄的膠帶）為您包裹傷口，請將它們留在原位約 1 週時間。

耳鼻喉科門診部的醫師會在您於術後 7 到 10 天到門診部複診時，為您移除手術縫合線。您的切口可能會呈現紅色和隆起狀態。在大多數情況下，該切口會在大約 6 個月內變平、消失。

### 排液管

醫師可能在您的切口下面放置一根排液管，用於在術後將您皮膚中累積的液體排出並監控出血情況。相關人員會在您出院返家之前為您拔除排液管。

### 飲食

可能在術後當天晚上，您便可正常飲食。您可能會因使用麻醉藥物而感到些許反胃。

### 活動

麻醉藥物藥效慢慢消失，當您覺得身體恢復之後，可以下床行走。到處走走將有助於您的肺臟健康和循環。在術後 2 週內，請避免提舉重物、拉伸或參加可能使您的血壓升高的活動。

### 藥物

#### 止痛藥物

您將會得到口服止痛藥物。您應該會有少許不適，但是咽喉疼痛和聲音嘶啞在術後都屬普遍現象。這些症狀可能會持續一週或更久。

#### 鈣

某些病人需要在術後每天驗血，以便確認甲狀旁腺是否正常運作。這些腺體控制血液中的鈣含量。在您的鈣含量穩定之前，您不可以出院返家。您可能需要服用幾天鈣補充劑。

## 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.

## Thyroid Hormone

Depending on your surgery, you may need to take thyroid hormone every day for the rest of your life. Your surgeon will write your first prescription. See your primary care provider or *endocrinologist* (doctor who specializes in hormones) for follow-up blood tests to check your thyroid hormone levels, as your dose may need to be adjusted.

## Return to Work

Most people who have this surgery return to work in about 1 to 2 weeks.

## When to Call

Call the nurse or doctor if you have:

- Any signs of infection in your incision:
  - Redness
  - Swelling
  - Increased pain
  - Foul-smelling discharge
- A fever higher than 101°F (38.3°C)
- Bleeding
- Nausea and vomiting
- Tingling around your mouth, fingertips, or toes



# Thyroidectomy or Partial Thyroidectomy

*How to prepare and what to expect*

**Thyroidectomy or partial-thyroidectomy surgery is done to remove all or part of your thyroid gland. This handout explains how to prepare for your operation and what to expect afterward.**

## How to Prepare

### *Before Your Operation*

- 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.

### *24 Hours Before Surgery*

- **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 nurse by 5 p.m., please call 206-598-6334.

UW Medicine

UNIVERSITY OF WASHINGTON  
MEDICAL CENTER

Otolaryngology –  
Head and Neck Surgery Center

Box 356161

1959 N.E. Pacific St. Seattle, WA 98195  
206-598-4022

© University of Washington Medical Center  
Pub. 05/2002, 04/2011  
Rev. 04/2011

Reprints on Health Online: <http://healthonline.washington.edu>

UW Medicine

UNIVERSITY OF WASHINGTON  
MEDICAL CENTER

The pre-surgery nurse will tell you when to come to the hospital and where to check in. The nurse will also 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
- **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.
- **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**

### ***Hospital Stay***

Most patients spend 1 night and the next day in the hospital after this surgery. Visiting hours are from 5:30 a.m. to 9:30 p.m.

### ***Incision Care***

You will have an incision at the base of your neck. It will be closed with sutures (stitches).

It is important to keep the incision area clean. If *Steri-Strips* (narrow pieces of tape) are used to cover your wound, leave them in place for 1 week.

Your sutures will be removed in 7 to 10 days, at your clinic visit in the Otolaryngology Clinic. Your incision may be red and raised. In most cases, it will flatten and fade in about 6 months.

### ***Drain***

You may have a drain placed below your incision to help remove fluid that builds up after surgery and to monitor bleeding. The drain will be removed before you go home.

### ***Eating***

You will probably be able to eat and drink normally the evening after your procedure. 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.

### ***Medicines***

#### **Pain Medicine**

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

#### **Calcium**

Some patients need daily blood tests after surgery to make sure their parathyroids are working normally. These glands control the amount of calcium in the blood. You will not be able to go home until your calcium level is stable. You may need calcium supplements for a few days.