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.

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
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.