



# Thyroid surgery

Knowing your  
options and  
what to expect



**Head & Neck**

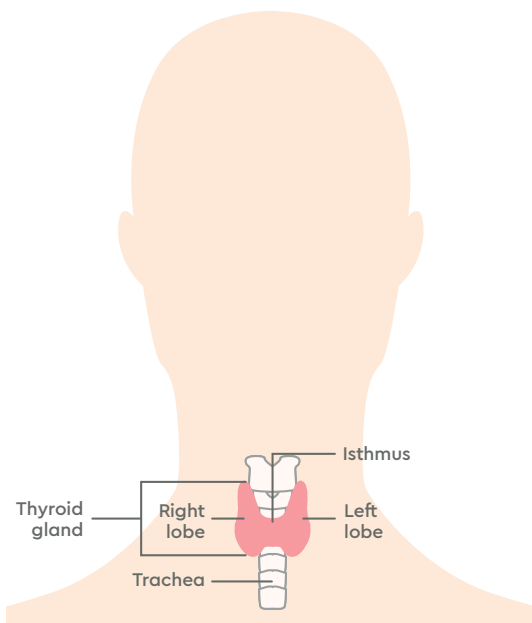
Surgical Cancer Specialists  
of SW Florida

Part of the **GenesisCare** network

# What is the thyroid?

Your thyroid is the butterfly-shaped gland in your neck, located just underneath your Adam's apple. The thyroid produces hormones that help stabilize your metabolism, heart and muscle function, brain development and bone strength.

## Thyroid





# What types of thyroid conditions require surgery?

There are several types of thyroid conditions that may require surgery.

These can include:

- **Goiters, which are when the thyroid is swollen or enlarged.** Goiters are the most common thyroid disorder and are often associated with an iodine deficiency, hyperthyroidism (creation of too much hormone) or hypothyroidism (creation of too little hormone).
- **Hyperthyroidism, which is when the thyroid is overreactive and produces too much of the hormone thyroxine.** When this occurs, it can increase your body's metabolism and lead to certain health conditions such as rapid and unexpected weight loss, an irregular heartbeat, Grave's ophthalmopathy (double vision and light sensitivity), osteoporosis, fertility issues and/or pregnancy complications.



- **Thyroid nodules, also known as thyroid adenomas, this is when a small lump or mass is found on the thyroid.** Depending on the type of nodule, the mass can be full of fluid or be solid, or it can be smooth or bumpy.
- **Thyroid cancer, which occurs when the cells in the thyroid grow out of control.** While not common, five to 15% of thyroid nodules end up being malignant, or cancerous.

In some instances, a thyroid condition may only require a "watch-and-wait" approach for treatment, while others need surgical intervention. Your surgeon will discuss what is most appropriate for your individual case.



# Thyroid surgery options

The type of surgery that your surgeon recommends will depend upon multiple factors, including how severe your thyroid condition is, its root cause and your individual needs and preferences. Additionally, your surgeon will likely ask that you undergo imaging or other medical tests prior to determine if surgery is appropriate.

## The most common types of thyroid surgeries include:

- **Hemithyroidectomy:** removal of part of the thyroid (also called a partial thyroidectomy)
- **Total thyroidectomy:** removal of the entire thyroid
- **Neck dissection:** removal of lymph nodes near the thyroid if there is suspicion of cancer (also called a lymphadenectomy)

# Your surgical care team

At our center, you have a team dedicated to developing a personalized treatment plan, taking into account your needs, medical history, cancer type and goals of treatment.

## Your thyroid surgery team will include:

- **Your otolaryngologist (head and neck surgeon):** Your surgeon specializes in the surgical management of benign (non-cancerous) and cancerous tumors of the head and neck, as well as reconstructive surgery. He/she will perform your thyroid surgery.
- **Your anesthesia team and certified nurse anesthetists (CRNAs):** These individuals evaluate, administer and monitor your anesthesia throughout your procedure. Ask your anesthesia team about pain management options for both during and after surgery.





- **Your operating room care team:** This team is led by your surgeon and comprised of your circulating nurses, your scrub technicians and other team members, all committed to providing your care while you are undergoing your operation.
- **Your supportive care team member(s):** You may also meet with additional healthcare professionals, such as advanced level practitioners, dietitians, occupational therapists and/or speech therapists who can help you manage side effects and better understand your treatment plan.



# Your pre-operative appointments

During your consultation, your surgeon will discuss the type of procedure he or she recommends and answer any questions you have. You will likely be asked to undergo imaging studies such as a thyroid scan or ultrasound, as well as other tests such as blood tests. Your surgeon may also refer you to another doctor for a check-up to make sure you are healthy enough to undergo surgery.

Your care team will advise you on any dietary or medication restrictions you should adhere to before surgery.



# Day of surgery

You will be provided comprehensive instructions from your care team about what to expect on the day of surgery. Typically, you should not eat or drink after midnight the day before surgery. You may shower and brush your teeth as normal, but not drink any water. Talk to your care team about any medicines or herbal supplements you typically take and if they should be taken on the day of surgery with a small sip of water. You will want to consider having a caregiver onsite for the procedure, even if you are spending the night in the hospital.

In the pre-operative area, your surgeon and anesthesia team will meet with you before surgery and answer any questions.

# During surgery

Your care team will place an IV into your arm or hand to deliver fluids and medications. After you are taken into the operating room, the anesthesia team will put you into a deep sleep, so you don't feel any pain.

Once the procedure begins, your surgeon will make an incision in the middle of your neck and perform the appropriate surgery. Your physician may also choose to perform a neck dissection, which removes lymph nodes and/or surrounding tissue that could potentially contain cancer. If this is performed, it also helps ensure the cancer does not spread further.

Once the procedure is complete, your surgeon will close the incision with stitches and/or bandaging.

# After surgery

After surgery, you will wake up in the recovery room. You will be monitored by a nurse who will watch your vitals (pulse rate, respiration rate, blood pressure, etc.) and help manage any pain that you might have. You may notice upon waking that your throat is sore and/or your voice is hoarse. These symptoms are common and should get better within a few weeks.

If you had a neck dissection to remove lymph nodes, you may have a drain (a small tube) in your neck. This could cause your neck to feel swollen or stiff. Your care team will help you empty any fluid from the drains while you are in the hospital and will be sure to educate you on how to empty the drain after you are discharged.

In some instances, you may be able to go home the same day as your surgery. In others, it may be recommended that you stay a day in the hospital while you recover. Either way, within hours, you should be able to eat and drink normally, as well as get up to walk. Due to the sore throat, you may find that a soft diet is more appealing in the beginning.

# Aftercare at home

Your clinical team will provide you with extensive instructions about how to care for yourself after leaving the hospital.

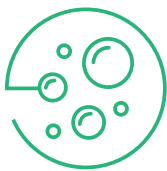
## It is important that you:



Take your medications as prescribed by your doctor. You may also be asked to take hormone replacement medication following surgery.



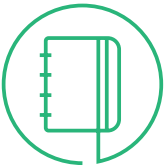
Avoid heavy lifting and strenuous activities and exercise until your care team advises you can begin again.



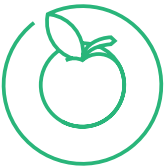
Unless your care team says otherwise, you should be able to bathe or shower as normal.



Avoid taking any over-the-counter pain medications, such as ibuprofen or aspirin, as these medications can thin the blood and cause bleeding. Your care team will discuss which pain medications are appropriate to take, as needed.



If you have a drain in your neck, be sure to follow your care team's instructions on how to empty the drain and care for any dressings. You will likely be asked to keep a drain diary and record how often and how much fluid was removed each time you care for the drain. Your care team will also provide instructions on how to change any dressings.



You should be able to eat a normal diet after surgery. However, if your throat is sore after surgery, following a soft diet for a few days might be helpful.

**Soft diet:** Also known as a "bland diet," this includes foods that are soft, mildly seasoned and low in fiber to aid with digestion. This could include beverages included in the clear liquid diet, bread or crackers (avoiding anything that is hard or has seeds/nuts), cooked or dry cereals, cooked noodles, soft fruits (bananas, baked and peeled apples or applesauce, canned fruits, etc.), chicken or fish that is tender, baked beans, tofu, peanut butter, soups, peeled and cooked vegetables, scrambled eggs, soft cheeses or yogurt, as examples.

Your clinical team will advise on when you can return to work and resume normal activities. All of this will depend upon the extensiveness of your surgery and your health status.





# When to call your surgeon

While some discomfort, bruising and swelling around the incision site after surgery is normal, call your surgeon if you have:

- A fever over 101°F
- Excessive bleeding that is soaking through the bandage
- Changes in your voice, neck swelling or breathing issues
- Pain that is not relieved with your prescribed medication
- Any signs of infection surrounding your drain site if you have one, if the tube falls out, if there is a change in fluid color or amount or if you notice any changes on the skin around the drain
- Any new symptom you are concerned about or questions for your doctor

# What to expect once surgery is complete

Typically, your surgeon will want to meet with you within one to two weeks after surgery to make sure you are healing well, discuss any new post-operative instructions and remove your drain if you have one.

Your care team is always available for you and can help manage any side effects even after your surgical treatment is completed.

## Contact us

Should you want more information about our treatment services, please visit us online: [genescareus.com](https://www.genescareus.com)



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