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## **POST OPERATIVE INSTRUCTIONS FOR THYROID / PARATHYROID**

- Your incision is closed with a dissolvable suture. A surgical **glue** will be directly covering the wound. This will generally fall off in 1-2 weeks. Do not worry if it comes off sooner.
- You may **shower** the day of surgery.
- Your incision will be firm, pink and raised over the next couple of weeks. This will eventually soften. Mild **bruising** is to be expected over the lower neck or upper chest. This will resolve without further concern. You may experience **neck pressure or tightness** when swallowing for the first couple of months. It is anticipated that this will completely resolve.
- You **may resume normal activities after one week**. No strenuous activity for the first week. Delayed bleeding complications can occur. If you experience any significant neck swelling or pain, call the office immediately at 303.449.3642.
- **Pain** should be minimal to moderate after your procedure. Post-operative complaints generally consist of pain with swallowing or a neck ache. Be sure to use an over-the-counter stool softener such as Colace or Docusate if using narcotic medications.
- Recommended **pain management** regimen:
  - Meloxicam (If prescribed): 1 tablet daily OR Ibuprofen: 400-600mg every 8hrs as needed.
    - These are anti-inflammatory drugs. **Do not take ibuprofen and meloxicam together**. If you have a sensitivity to anti-inflammatories, history of stomach ulcers, or kidney disease do not take anti-inflammatories.
  - Tylenol: This is over the counter. Take 1000mg 3x/daily as needed. Max of 4000mg/24hrs.
  - Oxycodone (or other prescribed narcotic medication): 1-2 tablets every 4-6 hours as needed for breakthrough pain.
- Your **voice** will often appear hoarse immediately after surgery. Other patients experience voice “fatigue” at the end of the day. This will usually resolve within 2-3 months.
- Hypocalcemia (low calcium level) is a common complication of thyroid or parathyroid surgery. Symptoms may include numbness/tingling around your lips or in your fingertips. Some patients may experience muscle twitching, headache, or “skin crawling”. This will usually occur within 2-3 days

after surgery. Treatment is with approximately 1,000mg calcium supplement 3 times daily. TUMS tablets are an easy form of supplementation- check the bottle for correct dosing (regular vs extra

strength vs ultra-strength). Have these on hand prior to returning home from the hospital. If symptoms do not resolve with TUMS (or your chosen calcium supplement), call the office at 303.449.3642. These symptoms should resolve within 7-10 days.

- Calcium levels will be checked 2 weeks after surgery. Slowly decrease your calcium supplementation every few days before these labs. A goal is to be off your calcium supplementation 24-48 hours prior to lab draw.
- **Thyroid patients:** thyroid supplementation – if you were taking thyroid supplementation prior to surgery, continue your current dose unless instructed otherwise. If you were not taking thyroid hormone prior to surgery, you may be given a new prescription. Thyroid hormone levels will usually be checked 4-6 weeks after surgery. Levels often do not stabilize for up to 6 months after surgery.
- If you experience **fevers** greater than 101 degrees Fahrenheit, chills, or any drainage other than a thin red color fluid, please call the office at 303.449.3642.
- **Driving** may be resumed when off all narcotic pain medications and you can turn or twist your body and neck comfortably without hesitation. Do not hesitate to move your head after surgery.
- Schedule a **post-operative visit** 2 weeks after surgery if one has not already been arranged. Please call the office at 303.449.3642.