

Surgeon - Dr. Manoj Kumar

Date of Procedure \_\_\_\_\_

## Thyroidectomy

The thyroid gland is found in the neck below the Adams apple. The gland produces a hormone called thyroid hormone which plays a role in the metabolism of the body. Thyroid hormone influences essentially every organ, every tissue and every cell in the body. It is a butterfly-shaped gland whose two lobes lie on either side of the upper trachea (windpipe) just below the larynx (voice box). A thin central portion (the isthmus) lies just over the trachea and connects the two lobes. Removal of one lobe of the thyroid is called hemi-thyroidectomy. Removal of both lobes are called total thyroidectomy.

The nerves to the larynx or voice box run close to the thyroid gland. These nerves are called superior laryngeal nerve and recurrent laryngeal nerve. Damage to superior laryngeal nerve may slightly change the quality of voice. The more crucial nerve to speech is the recurrent laryngeal nerve that passes the thyroid lobe. Injury to the recurrent laryngeal nerve may cause paralysis of the vocal cords. The effect of this vocal cord weakness varies considerably between individuals as some patients demonstrate no detectable voice change and others become hoarse. If hoarseness does result, it is usually temporary. We use continuous nerve monitoring techniques at the time of surgery to minimize the risk of damage to nerves.

### Why is the procedure done?

- ⑩ Suspicion or the presence of thyroid cancer
- ⑩ Abnormal findings during needle biopsy
- ⑩ Multiple nodules
- ⑩ Pressure on the trachea or esophagus
- ⑩ Graves' disease and/or Thyrotoxicosis

### How is the Operation Done?

- ⑩ The surgery is done under general anesthesia through a transverse incision below the collar line. The incision heals well with minimal scarring.
- ⑩ The patient will have to wait up to 10 days before getting the final diagnosis. Then further treatment plans will be determined once the results are obtained.
- ⑩ Patients are usually discharged home 1-2 hours after surgery.
- Hemi thyroidectomy (removal of half the gland) takes about 2 hours while total thyroidectomy takes about 3-4 hours.

### What should I expect after surgery?

If thyroid cancer is present, treatment with radioactive iodine will be done to remove any thyroid tissue left behind.

You may require lifetime thyroid hormone replacement in the form of a pill with levels monitored by blood tests.

**Treatment after Surgery:**

When thyroid cancer is present, treatment after thyroidectomy usually includes the administration of radioactive iodine along with lifetime thyroid hormone replacement.

**Would Care Instructions:**

Keep the wound clean

Sleep with head elevated on pillows or in a recliner.

Keep the outside dressing on for 1-2 days and the clear dressing on until your post-operative appointments

Use ice when swelling is present

Avoid extending the neck

No swimming for two (2) weeks

\*Note that the skin around the incision will be numb for several months after surgery

**What are the Diet Orders?**

No dietary restrictions after surgery

**When May I Return to Work?**

7-10 days after surgery

What is my Follow-Up Schedule?

**Possible complications:**

- Post-operative bleeding is a complication, although rare, may require further surgical procedures to control the bleeding.
- Even with the greatest care, occasionally the recurrent laryngeal and superior laryngeal nerves may be injured during surgery. When necessary we use continuous nerve monitoring to reduce the risk of damage.
- If the blood supply to the parathyroid glands is injured at thyroidectomy, there may be a decrease in the calcium level in the blood. This is usually temporary and can be managed with the administration of calcium and vitamin D by mouth. Hypoparathyroidism is rarely encountered when only one lobe of the thyroid is removed.
- Wound infections may also occur and can usually be managed in the office with antibiotics and minor wound care.

*Thank you for allowing us to care for you at the Cortland Surgical Center  
if you have any questions please contact us at (607) 662 - 4521*