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THYROIDECTOMY POST-OPERATIVE INSTRUCTIONS

Before and after your surgery we will have you hold any anticoagulants including Plavix, Coumadin, Fish Oil, Aspirin, Ibuprofen, and Motrin for 2 weeks before and after surgery unless instructed otherwise.

Start with a light meal or a liquid diet on the first day after surgery and then advance to a regular diet as tolerated. Patients may notice a scratchy throat for a few days after surgery.

Neck pain and stiffness are common after surgery. Your physician will order a pain medication to help with this discomfort. Avoid straining and heavy lifting for at least 1 week after surgery. Light to moderate activity as tolerated is okay. When resting, keep head elevated to reduce bruising and swelling.

Occasionally a drain may be left in the incision to remove fluid that can build up. The drain is typically removed the day after surgery.

Some numbness is common. We expect the area to be more red and swollen than the surrounding skin. The incision will gradually improve in appearance over the next year.

Some patients may also experience a hoarse, whispery, or tired voice. The hoarseness is usually temporary, but in some cases it can be prolonged.

After surgery you will have an incision, which will either be sutured or covered with a surgical glue called Dermabond, a clear film over the incision that keeps the outer layer of skin together instead of using sutures. The Dermabond stays in place for 5-10 days, and will begin to peel off your skin on it's own. Please do not scratch, rub, or pick at Dermabond. Do not try to pull the Dermabond off prematurely. Do not apply tape directly to the Dermabond. Do not apply ointment of any type to the Dermabond. If you have sutures we will bring you back into the office within 1-2 weeks to remove them in office.

You may shower/bathe and get Dermabond mildly wet, do not soak or scrub incision. Gently blot incision dry after showering.

After the Dermabond peels off or the incision is almost healed after sutures are removed, you can keep the area moist with Vitamin E cream for 2-3 weeks. Protect the area from sun exposure for 1 year with sunscreen of SPF 30 or greater.

Following either a partial or total thyroidectomy, you will likely be placed on Synthroid. Synthroid is a replacement for the natural hormone your thyroid makes. You will need to have lab work (TSH, thyroid stimulating hormone and T4) done regularly until your thyroid levels become stable. Once these levels are stable, you will be released to your primary care provider to monitor labs and manage Synthroid dosing and refills.

If you have a completion thyroidectomy or a total thyroidectomy, in addition to thyroid levels, we will also monitor your calcium levels through a blood test. You will be placed on calcium supplement after surgery and will most likely need to remain on this medication. Since calcium levels can fluctuate after surgery, you need to watch for symptoms of low blood calcium. These symptoms include numbness of the fingers or lips, muscle cramps, or facial twitching. If you notice any of these symptoms, notify our office or advisory nurse.

You will be seen in our office for a post operative appointment 6 days after your surgery with one of our midlevel providers. Pathology will be reviewed at this appointment and depending on what this shows you may need to be scheduled for an addition surgery the following day.

Please do not hesitate to contact our office with any questions or concerns at 309-585-0370.