

## **INSTRUCTION SHEET: PAROTIDECTOMY (Removal of the parotid gland)**

### **WHERE IS THE PAROTID GLAND?**

Your parotid gland is a salivary gland located alongside the jaw, in front of and below the ear. It is one of the glands responsible for secreting saliva.

### **WHAT IS A PAROTIDECTOMY?**

Your doctor has determined that you have an abnormality in your parotid gland which requires surgery. This could be a tumor or cancer, and normal gland around the abnormality needs to be removed as well. Thus, the majority of the gland requires removal.

The removal of the gland requires a surgical incision in front of the ear which is then extended below the earlobe, then curves beneath the jawbone into the upper neck. This is needed to provide the best surgical exposure but in the most cosmetic fashion. The facial nerve is then identified and the gland over this is removed. If the abnormality is noted deep to the facial nerve, then this remaining gland is removed. Also, there is a nerve (the great auricular nerve) that enters the gland and often needs to be cut, and this will cause numbness over the lower face and earlobe, which often is permanent.

Sometimes the pathologist will check the specimen (frozen section pathology) to provide a preliminary diagnosis.

If a malignant tumor is noted, then a neck dissection may be required. This includes removal of the submandibular gland (the salivary gland below the jaw) and lymph nodes in the neck below the parotid gland. This might require an additional surgical incision.

A drain is often placed prior to closure of the surgical site, and a dressing might be placed over your face and wrapped around your head. The drain usually is removed the next day.

### **INSTRUCTIONS PRIOR TO SURGERY:**

1. No aspirin or ibuprofen containing medications two weeks before surgery
2. Nothing to eat or drink after midnight the night before surgery.

### **INSTRUCTIONS FOR AFTER SURGERY:**

1. Your doctor will prescribe pain medication for after surgery. Oftentimes patients only need Tylenol for pain. Patients often notice pain over the face and neck and sometimes there is some stiffness on the side of the neck from the surgery. You will likely feel numbness over the lower face and ear. This is common and often be permanent.
2. You will need to sleep with your head elevated above the level of your heart. This can be accomplished by sleeping on several pillows or in a reclining chair. This helps to reduce swelling and pain to the neck.
3. You may shower or bath and wash your hair afterwards. You should place a layer of antibiotic ointment (such as Neosporin or Bacitracin) over the incision before and afterwards. Try not to have water directly on the wound. If it gets wet, lightly dab dry it. Do not wash or vigorously rub the surgical site for about two weeks.

4. Diet: Start with liquids and soft food, and advance to a normal diet as you are able to tolerate.
5. You will need to make an appt for about a week after surgery for removal of the sutures.

**WHEN TO CALL:**

1. If you have pronounced swelling, redness, or drainage of the neck or face, temperature over 101, problems breathing, or pain that is not controlled with the prescription pain medication.