

Neck Dissection Postoperative Care Head and Neck Surgical Oncology

Home Care

Hand Hygiene

When you are discharged home after surgery it is vitally important to utilize good hand hygiene when caring for your incisions. This will help prevent infection.

Neck Dissection

Removal of lymph nodes and other structures in the neck may be a part of the treatment for your head and neck cancer. Lymph nodes may be removed if they are obviously involved with cancer or if your primary tumor has increased risk of spreading to lymph nodes. Your surgeon will discuss the specifics of your case pre-operatively. Your doctor has recommended the removal of lymph nodes (and sometimes other structures from the neck). This procedure is called a **neck dissection**. Most patients who have this surgery are hospitalized for at least 1 to 2 days, possibly longer.

What is involved with surgery?

A neck dissection involves making an incision in your neck to gain access to remove lymph nodes. A neck dissection may be done alone or may also be done as a part of a larger procedure. There are several types of neck dissections. Your surgeon will choose the correct type depending on where your cancer is, and which lymph nodes may be affected. Once the lymph nodes have been removed, your incision will be closed with Dermabond (glue), sutures, or surgical staples. You will likely have one or more drains placed in your neck.

What to expect after surgery?

The lymph nodes in your neck are in close proximity to nerves that help you move your lower lip, move your tongue and move your shoulder. These lymph nodes are carefully removed from around these nerves, but manipulation of these nerves may cause them to be weak temporarily. You may notice weakness of these muscles that improves with time.

During your hospitalization, you will be seen by a physical therapist. In addition to working on mobility, they will give you shoulder exercises. You should perform these shoulder exercises at least twice daily during your hospitalization and continue this regimen after your discharge home. This will reduce your risk of developing neck and shoulder discomfort and long-term dysfunction.

- You will most likely require a minimum of a one night stay in the hospital
- You may or may not need a Jackson-Pratt (JP) drain placed
 - Drain will prevent buildup of fluid in the surgical site
 - You will be given instructions on how to care for your JP drain in the event that you are discharged home with drain(s)
- After surgery your body will need time to heal

Patient Education

- **Do not** lift over 10 lbs. until your surgical team clears you to do so.
- When cleared by your surgical team, please restart your normal day to day activities slowly
- **Do not** drive if you are taking prescription narcotics or until your surgical team clears you to do so.

During your hospital stay, the Health Care Team should:

- Provide you with the patient information sheet “Breathing Exercise Using Incentive Spirometer.”
- Check on your progress, your incision and drain
- Help you sit up on the side of your bed and then stand. You will be encouraged to walk around your room and to the bathroom
- Check on your progress, your incision and empty your drain
Raise your bed to a 45-degree angle to decrease swelling

Medication

Tylenol and ibuprofen may be sufficient for pain control after the procedure. You may also require narcotics for the initial few days after surgery. If your narcotic pain medication contains Tylenol, please make sure to limit your total daily Tylenol to 4 grams. Take pain medication as directed by your pharmacist or doctor. Please **do not** drink alcohol. **Do not** drive if you are taking prescription narcotic medication. If you are having increased pain, please let the nurse or doctor know. Our goal is for you to have good pain control after your surgery and during recovery. While our goal is to reduce your pain, we may not be able to eliminate all pain. If your pain medications are not effective in treating your pain please contact the Head and Neck clinic team.

Incision care

After surgery, your neck may have Dermabond, dissolvable and/or non-dissolvable sutures or staples. You will need to follow up with your surgeon about 1- 2 weeks after surgery for an incision check and to have the non-dissolvable and/or staples removed in clinic. You may shower when you are discharged home. **Do not** let shower hit incision directly. Wash the incision daily with soap and water. Pat dry. **Do not** use any ointment or cream over the incision except for those specified by your surgical team. Antibiotic ointment (e.g. Bacitracin) will be used on the incision if it is closed with sutures or staples until the first post-operative appointment with your surgeon. The dressing of the incision site will be discussed with you before you are discharged by a member of the Head and Neck team.

Special Instructions

Some issues may come up that are normal for your type of surgery.

- You may experience numbness over the incision itself or over areas near the incision. This is normal and will most likely improve with time.
- It is normal to have a small amount of drainage from the incision after surgery. This fluid may be blood-tinged or clear yellow. Keep the incision covered with a dressing until this stops. Change the dressing as directed by your surgical team.

Patient Education



- Weakness of shoulder muscles due to temporary nerve dysfunction. This will improve with time.
- Nutrition is important for wound healing after surgery so make sure to get adequate amounts of calories and protein in your diet
- Call your doctor immediately if you're having any of the following symptoms:
 1. Bleeding from the incision that will not stop. You should hold firm pressure over the area and go to the nearest emergency room
 2. Separation of the skin at the incision site
 3. Worsening redness around the incision
 4. Temperature of 101° F (38.3°C) or higher
 5. Tenderness, swelling, pus, warmth, redness or pressure around the incision site

Follow-up Care

You will have a post-operative visit with your surgeon about 2 weeks after your surgery for an incision check. You will be given a follow up date and time before you are discharged from the hospital. If you are discharged home with non-dissolvable sutures, JP drain(s), or staples then, you may follow up in clinic with a nurse prior to your post-operative visit. You will be given instructions on when you should call the Head and Neck clinic to remove drains. *Please remember to bring your JP log sheet with you to clinic*

Emergency Center

In case of any emergency, call 911 or go to the nearest emergency center. *For non-emergencies during business hours, call our triage line at 904-202-7300 option 3.*

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