

Post Op Thyroid Surgery

Medications & Pathology - Upon discharge you will be given a list of medications you will need to take and a form to have a blood test with a date specified. You will be contacted after the pathology results are available and advised if your current medications need to be altered.

Physical Activity - Early return to light activity is encouraged. This includes walking from Day 1 short distances & building up to normal distances at one week. At two-three weeks you can exercise bike ride, swim (if wounds healed), light jogging & light limb weights. At four weeks you can return to all normal activities.

Work - Returning to work depends on the type of work returning to. Most people will be able to return to desk jobs at 1-2 weeks. Active jobs, car travel & light duties (up to 12kg) 2-3 weeks

Jobs involving heavy manual work & lifting – 6 weeks

Driving & Travel - It is usually safe to drive a car short distances at 5-7 days postoperatively. The important test is that you can brake quickly if required. Travelling long distances in a car as passenger or driver is not advised until 2 weeks post-operatively. Short Haul Air Travel should be safe after one week & long haul after three weeks

Wound care - You will leave hospital with steri strips and fixomul over your incision. You may shower with the dressings ensuring that you dry with a cool hairdryer after showering. This dressing can remain until your post op apt. The dressing will be changed at the post op apt and we recommend that the incision remains covered for another 2-4 weeks to help with healing & minimise scarring.

Pain Control - You will be given pain medication upon discharge. Usually 2-3 days post-surgery the discomfort should be easily controlled with paracetamol alone. Whilst the stronger pain medication is useful in the early post-operative period, prolonged use will result in constipation, nausea and episodes of light-headedness.

Bowel Care - All patients experience some slowing of bowel function after Surgery. This can be caused by fasting prior to surgery, pain medications, calcium tablets and less physical activity.

It is recommended all patients take an aperient when needed post-surgery to help bowel function return to normal.

Swelling around incision - You may form a seroma in your neck near the incision. The fluid fills the space left behind after surgery, it is very normal however if causing pain or discomfort this can be drained in the rooms. If only minimal we will treat conservatively as it will dissipate over time.

Please call our rooms if you have - persistent fever over 38.5 C / chills, bleeding, increasing swelling which is causing discomfort, pain that is not relieved by your medications, persistent nausea or vomiting, inability to urinate, persistent cough or shortness of breath, purulent drainage (pus) from any incisions or redness that is worsening

Please feel free to contact us anytime should you have questions or concerns

Skye & Jayne - Practice Nurses

07 5598 0644

Monday – Thursday

practicenurse@goldcoastsurgicalgroup.com

Consulting Locations:

Suite 402, John Flynn Specialist Suites * Suite 8, Ground Floor, HQ Building, 58 Riverwalk Ave, Robina

Operating Locations:

John Flynn Private Hospital * Pindara Private Hospital * Tweed Heads Public Hospital