



EXCISION OF NECK MASS

General:

Neck masses can occur for a number of reasons, the most common is an enlarged lymph node. Lymph nodes can become enlarged from infection or due to involvement with a tumor. The lymph node is removed to determine the cause of the enlargement. Cysts can also cause neck masses. The cyst is left over from fetal development. The cyst should be removed to [prevent it from becoming infected. It is possible to develop tumors originating from nerves, fat or muscle. These tumors can be benign or malignant.

Risks and Complications:

There are many nerves that travel in the neck. Incisions are planned not just to minimize scarring but to try and protect the nerves. Bleeding and infection are possible as with any surgery.

Diet:

Unless otherwise directed, you may have liquids by mouth once you have awakened from anesthesia. If you tolerate the liquids without significant nausea or vomiting then you may take solid foods without restrictions.

Generally, patients experience a mild sore throat for 2-3 days following neck surgery. This usually does not interfere with swallowing.

Pain Control:

Patients report moderate neck pain for several days following neck mass excision. You will be prescribed pain medication prior to surgery. Please use as directed. You should avoid non-steroidal anti-inflammatory drugs (NSAIDs) such as aspirin, ibuprofen, naproxen (Excedrin®, Motrin®, Naprosyn®, Advil®) because these drugs are mild blood thinners and will increase your chances of having a post-operative bleed into the neck tissues or neck wound. Please contact our office 910.323-9222 if your pain is not controlled with your prescription pain medication.



Activity:

Sleep with the head elevated for the first 48 hours. You may use two pillows to do this or sleep in a reclining chair. Gentle rotation, flexion and extension of the head and neck are permitted. No heavy lifting or straining for 2 weeks following the surgery. You should plan for 1 week away from work. If your job requires manual labor, lifting or straining then you should be out of work for 2 weeks or limited to light duty until the 2 week mark.

Wound Care:

Do not wash or manipulate the neck wound for 48 hours following the surgery. You may shower and allow the wound to get wet 48 hours following the surgery. Allow soap and water to run over the wound. Do not scrub or manipulate the wound for 7 days. Pat the area dry; don't rub it with a towel. After 7 days you may gently lather the wound with soap and water. Mild redness and swelling around the wound is normal and will decrease over the 2 weeks following surgery.

Follow-up Appointment:

Your follow-up appointment in the office will be 7-10 days following your surgery. If you do not have the appointment made, please contact our office when you arrive home from the hospital. At the postoperative visit the pathology report is reviewed and your sutures or staples are removed.

Please call our office immediately if you experience:

- Difficulty breathing or swallowing
- Neck Swelling
- Bleeding from the wound
- Fever greater than 101 degrees Fahrenheit
- Purulent discharge (pus) coming from the wound
- Increasing redness around the wound