Parotidectomy Post-op Instructions

For 10 days prior to surgery and 7 days following surgery, do not take Aspirin or aspirin products, including Alka-Seltzer, Aspergum, Ibuprofen, Advil or Mortrin. Tylenol is permitted.

The Parotid gland is the largest of the salivary glands and it lies in front of and below the ear. Following a Parotidectomy, you may experience pain and difficulty swallowing. You may also experience some facial numbness or weakness. When resting, keep head elevated or sleep in a recliner. This reduces swelling.

Expect to eat a liquid and soft diet for the first few days following surgery. Chewing may be uncomfortable due to irritation of the masseter muscle that lies below the parotid gland in the cheek.

After surgery, you will have an incision, which will be either sutured or covered with a surgical glue called Derma Bond. Derma bond is a clear film over the incision that keeps the outer layer of skin together instead of using sutures. We will make an appointment for you to come back in the office 1 week post op for removal of the sutures.

You could possibly be discharged with a drain left in the incision site to remove fluid that can build up. Please do not pull on the drain or try to empty the attached plastic bulb unless instructed otherwise by your doctor. Your doctor will let you know when the drain will be removed. Once the drain is removed, a little antibiotic ointment may be used at the site of the drain. In general, the drain wound heals and stops oozing in 24 hours.

If you experience difficulty drinking fluids, smiling or winking please contact our office at (309) 268-3200.