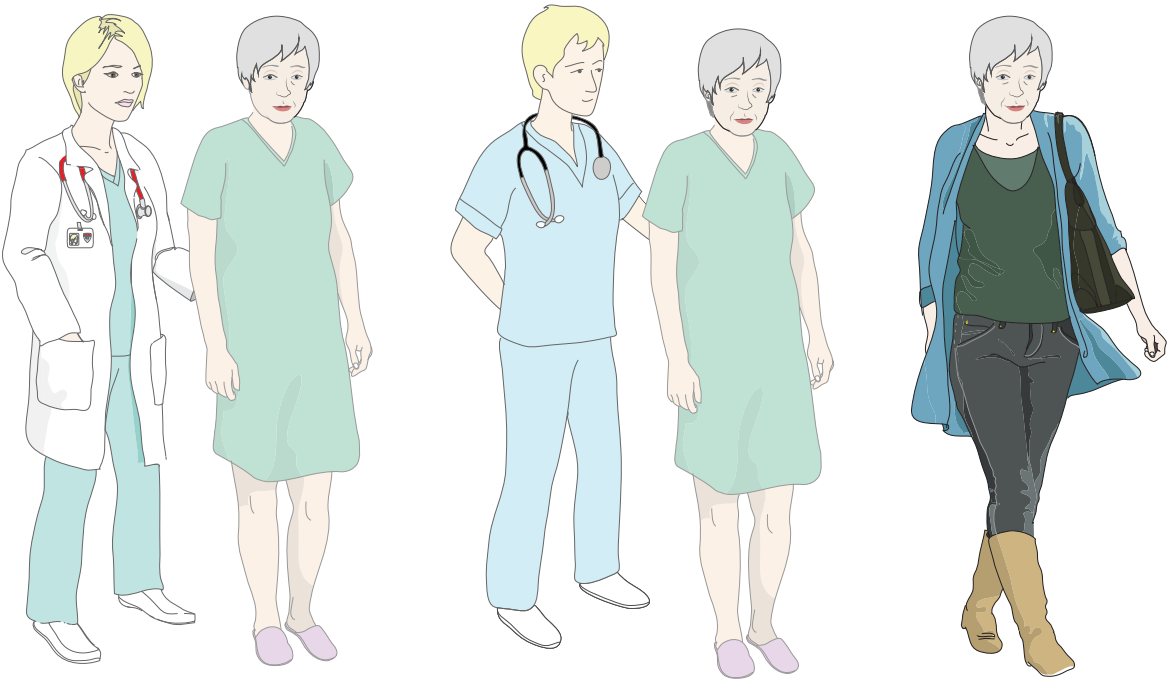


A Guide to Thyroid Surgery



This booklet was developed by The MUHC Clinical Care Pathway Working Group, and reviewed by the surgeons.

We would like to thank the MUHC Patient Education Office for their support throughout the development of this document, including the design, layout and creation of all the images.

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Important

Information provided by this booklet is for educational purposes. It is not intended to replace the advice or instruction of a professional healthcare practitioner, or to substitute medical care. Contact a qualified healthcare practitioner if you have any questions concerning your care.



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What is a Care Pathway?

When you are admitted to the hospital for thyroid surgery, you will be part of a fast recovery program called a Clinical Care Pathway. The goal of this program is to help you recover quickly and safely. Your health care team worked together to create this pathway.

This booklet will:

- Help you understand and prepare for your surgery
- Explain how you can play an active part in your recovery
- Give you daily goals to achieve

Research shows that you will recover faster if you do the things explained in this booklet. There are instructions about your diet, physical activity, and controlling your pain. These things will help you to feel better faster and go home sooner.

Please bring this booklet with you on the day of surgery. Use it as a guide during your hospital stay. Hospital staff may refer to it as you recover and review it with you when you go home.

Having surgery can be stressful for patients and their families. The good news is that you are not alone. We will support you each step of the way. Please ask us if you have questions about your care.

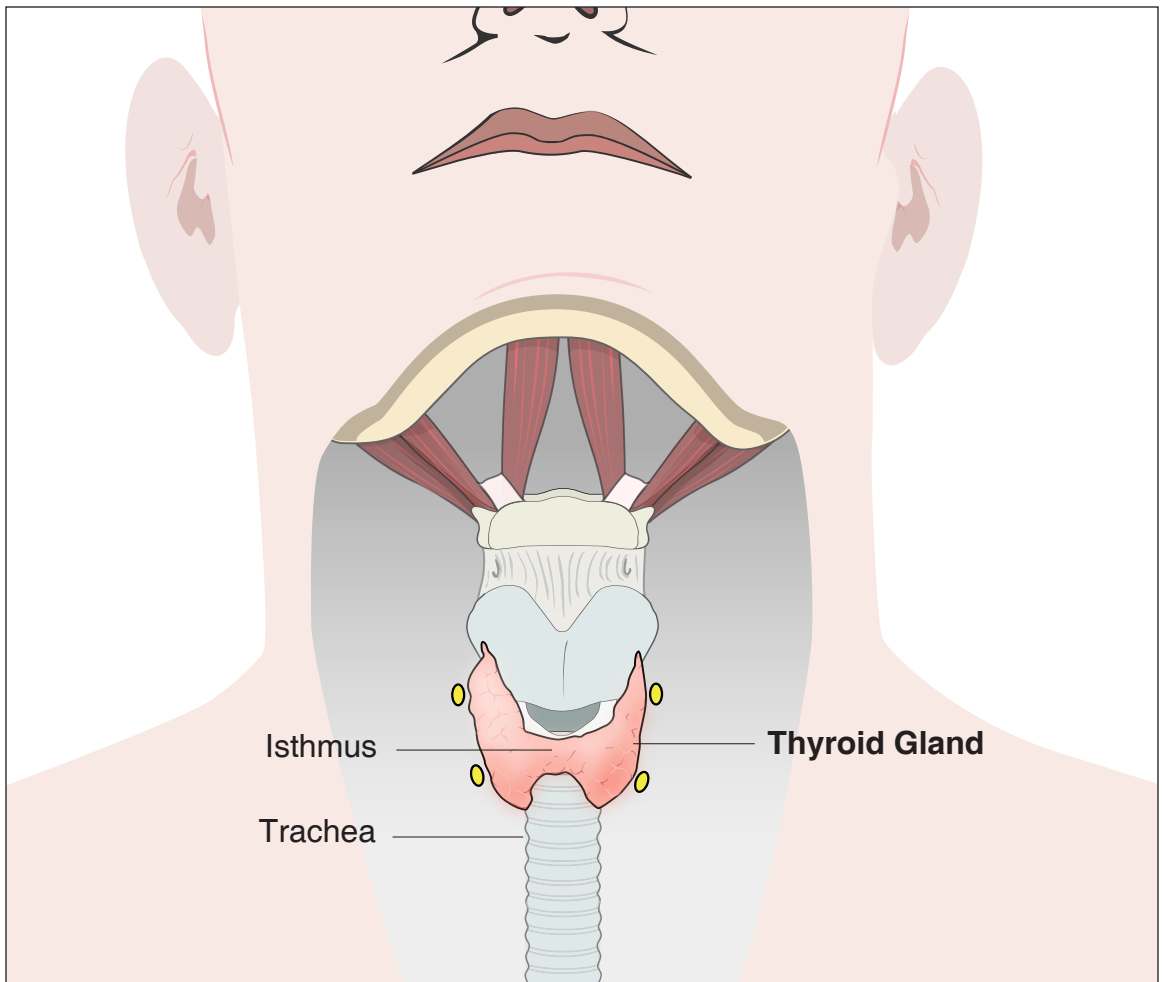
Your MUHC surgery team

If you do not speak French or English, please bring someone to translate for you.

What is the Thyroid?

The thyroid is a gland located in the front of the neck, wrapped around the windpipe (trachea). It is shaped like a butterfly, with two wings (lobes) joined by a narrow band of thyroid tissue called the isthmus.

The thyroid gland makes thyroid hormones, which help to control the energy and metabolism in your body.

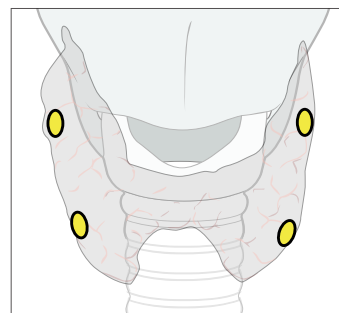
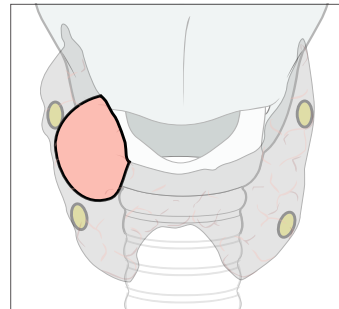
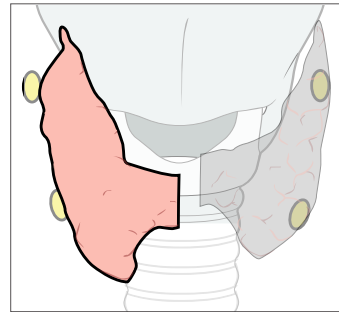


What is Thyroid Surgery?

Thyroid surgery may remove all or part of the thyroid gland. It is done for a variety of conditions, including thyroid nodules (cancerous and non-cancerous), large thyroid glands (goiters), and overactive thyroid glands.

Types of thyroid surgery

1. **Hemi-thyroidectomy** is the removal of one lobe.
2. **Subtotal thyroidectomy** is the removal of almost all of the thyroid gland, leaving a piece of one lobe.
3. **Total thyroidectomy** is the removal of the whole thyroid gland.



After thyroid surgery, the function of your parathyroid glands may be affected. These glands control the calcium balance in your blood. Although they have nothing to do with the thyroid, they are located near it and may become “lazy” after thyroid surgery. We will check your blood and give you calcium if you need it. This problem is usually temporary, but occasionally it may be permanent.

Preparing For Your Surgery

Be active

Exercise will help your body to be as fit as possible and keep your weight under control. If you are already active, keep up the good work. If you are not, start adding activity into your day. Exercise does not need to be strenuous to make a difference. A 15-minute walk is better than no exercise at all.



Stop smoking

If you smoke, try to stop before your surgery to reduce your risk for lung problems. Your doctor can help you stop smoking by prescribing medication. See page 26 to learn more.



Restrict alcohol

Do not drink alcohol for 24 hours before your surgery. Alcohol can interact with the medicine you will receive in the hospital. Please tell us if you need help decreasing your alcohol use before your surgery.

Preparing For Your Surgery

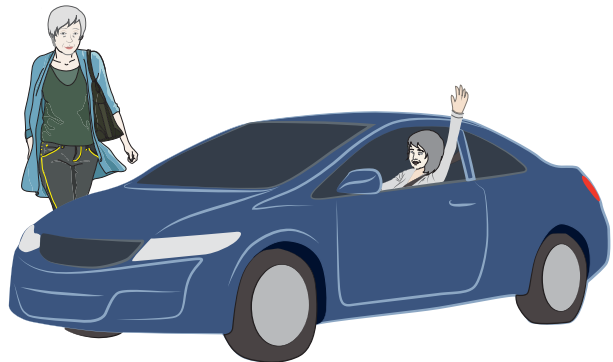
Plan ahead

You may need help with meals, laundry, bathing or cleaning, when you go home from the hospital. Stock your fridge and freezer with food that is easy to reheat. Make plans with your family and friends so you will have the help you need.



Arrange transportation:

The day of surgery is called Day 0. You may go home from the hospital on Day 1 after your surgery. Tell your nurse if you have concerns about going home. Remember to arrange a ride.



Pre-operative Clinic Visit

When you visit the Pre-op Clinic, you will:

- Have blood tests
- Have an ECG (electrocardiogram), if you are over the age of 50
- Meet with a nurse who will explain how to get ready for surgery and what to expect while you are in the hospital
- Meet with a doctor who will review your medication and ask you questions about your health. If you have medical problems, you may be referred to another doctor (a specialist) before surgery.

You may need to stop taking some medicines and herbal products before surgery. The Pre-op Clinic doctor will explain which medicines you should stop and which ones you should keep taking.



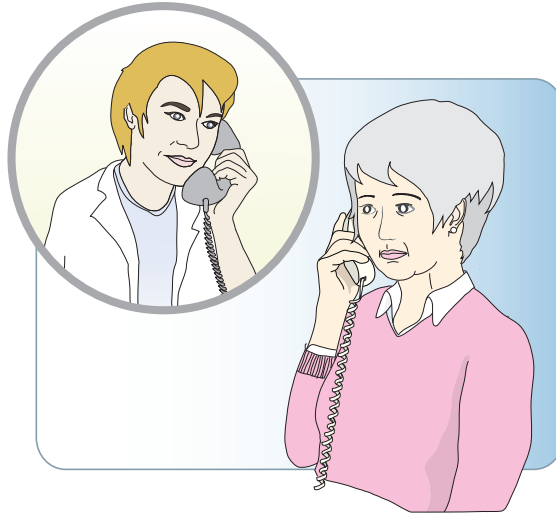
If you have any questions, you may contact the Pre-op Clinic nurses at (514) 934-1934, extension 34916, Monday to Friday.

RVH Preop Clinic: Located near the cafeteria on DS1.2428 (Bloc D, S1 level).

Phone Call From Admitting

The day before your surgery, the Admitting Department will phone you, to tell you when to come to the hospital. They will ask you to arrive 2 hours before your planned surgery time. **Exception:** If your surgery is planned for 7:30 am, they will ask you to arrive at 6:30 am.

The time of surgery is not exact. It may happen earlier or later than planned.



Date of surgery:

Time of arrival at the hospital:

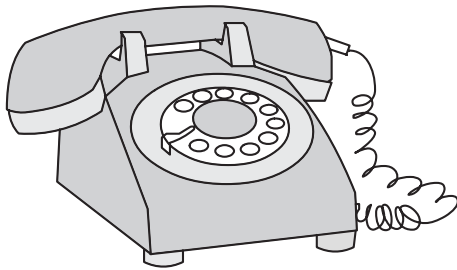
Room: **Registration, Surgery and Intervention Centre, Bloc C, level 3 (C03.7055).** Enter the building through the Royal Victoria Hospital main entrance. Take the first set of elevators on your right or left (North) and go to the 3rd floor.



If you do not receive a call from Admitting by 2:00 pm, you may call them at (514) 934-1934, ext. 31557.

Cancelling Your Surgery

If you get sick or pregnant, please call your surgeon's office as soon as possible. If you cannot reach your surgeon, call the Admitting Department (514) 934-1934 ext. 31557.

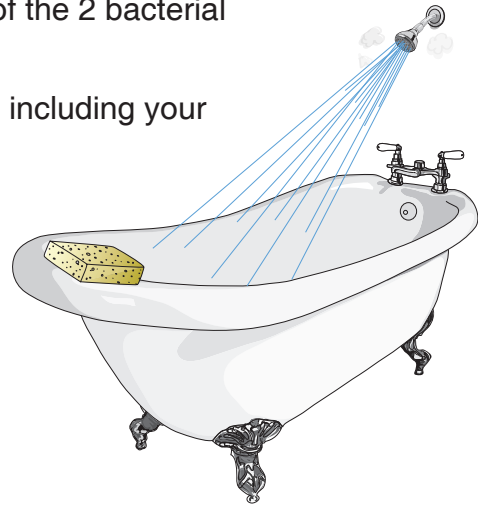


The Royal Victoria Hospital is a Transplant and Cardiac Centre. This means your surgery may be delayed or cancelled because of an emergency. If this happens, your surgeon will rebook your surgery as soon as possible.

Hygiene

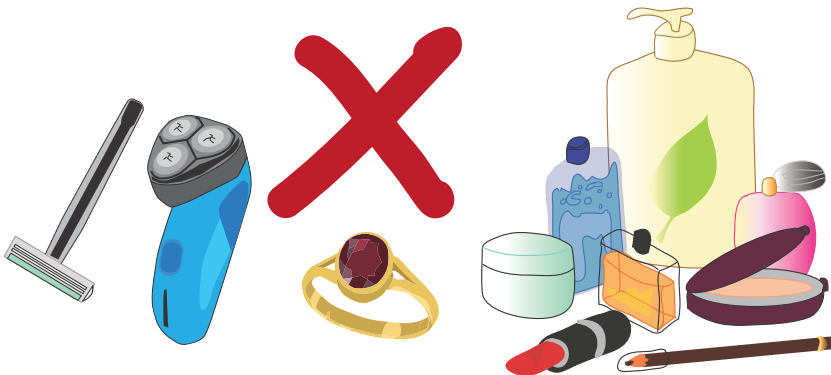
The night before your surgery:

1. Use regular soap and shampoo for your face and hair
2. Take a shower or bath by using one of the 2 bacterial sponges your were given
3. Wash your body from the neck down, including your belly button
4. Wear clean clothes to bed



The morning of your surgery:

1. Take a shower or bath using the second sponge
2. Do not wear lotion, perfume, makeup, nail polish, jewelry or piercings
3. Do not shave the area where the operation will be done
4. Put on clean clothes



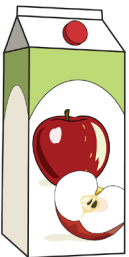
Diet

The nurse in the Pre-op Clinic will explain what to eat and drink before your surgery to give you the energy and nutrients you need to recover quickly.

The day before your surgery:

- Do not drink alcohol
- Eat and drink normally until midnight
- Drink a carbohydrate drink (clear juice) during the evening (see image below)
- **After midnight, do not have any food, dairy products, or juice with pulp**

Carbohydrate drinks: Choose only 1.



Apple juice
850 ml



Orange juice
without pulp
1000 ml



Commercial
iced tea
1100 ml



Cranberry
cocktail
650 ml



Lemonade
without pulp
1000 ml

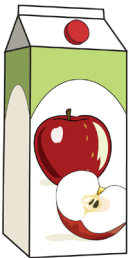
Diet

The morning of your surgery:

- Do not eat any food
- Drink a carbohydrate drink (clear juice) 2 hours before your surgery (see below)
- Do not have any dairy products or juice with pulp
- Stop drinking 2 hours before your surgery. This is usually the same time as you are asked to arrive at the hospital. **Exception:** If you are the first case of the day at 7:30 am, you will be asked to arrive at 6:30 am. Stop drinking at 5:30 am.

A small number of people should not drink at all on the day of surgery. Your nurse will tell you if you need to stop drinking at midnight. Most people should drink clear liquids until two hours before surgery.

Carbohydrate drinks: Choose only 1.



Apple juice
425 ml



Orange juice
without pulp
500 ml



Commercial
iced tea
550 ml



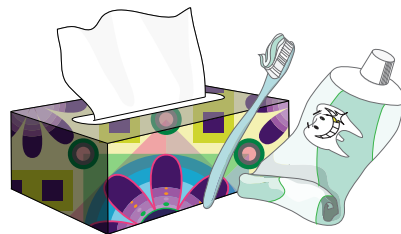
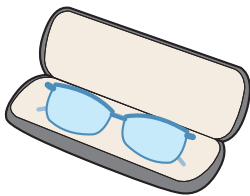
Cranberry
cocktail
325 ml



Lemonade
without pulp
500 ml

What to Bring to the Hospital

- This booklet
- Medicare card
- Private insurance information, if you have any
- Your medications in their original containers
- Bathrobe, slippers, pajamas, loose comfortable clothing
- Toothbrush, toothpaste, mouthwash, comb, deodorant, soap, shaving supplies, tissues, and perhaps earplugs
- Glasses, contact lenses, hearing aids, dentures, and their storage containers labeled with your name
- Cane, crutches, walker labeled with your name



Please do not bring anything of value, including credit cards and jewelry. The hospital is not responsible for lost or stolen items.

At the Hospital

Admitting area

Report to Registration, Surgery and Intervention Centre, Bloc C, level 3 (C03.7055), at the time you were given.

Enter the building through the Royal Victoria Hospital main entrance. Take the first bank of elevators on your right or left (North) and go to the 3rd floor.

Pre-operative area

The nurse will ask you to change into a hospital gown and will complete a preoperative checklist with you.



Operating room

An orderly will take you to the operating room. You will meet your anesthetist (the doctor who will put you to sleep) and other members of your surgical team. You will be asleep and pain-free during your surgery.

At the Hospital

Waiting room

Family or friends may wait for you in the registration area in Bloc C, level 3. It will be several hours before they will be able to visit you in your room. There are no visitors in the Post-Anesthesia Care Unit (PACU) unless you are staying there overnight.

Other resources

- Cafeteria – Located off the Adult Atrium on the S1 level
- Vending machines – Block C, S1 level
- Stores – Galleria, Rez-de-chausée level; Atrium, S1 level
- Bank machines – Blocks C & D, Rez-de-chausée level
- Adult Resource Centre (library) – Block B, Rez-de-chausée level
- Prayer and meditation room – Between blocks C & D, Level 2, Room 1178
- Internet access

Network: CUSM-MUHC-PUBLIC

Username: public

Password: wifi

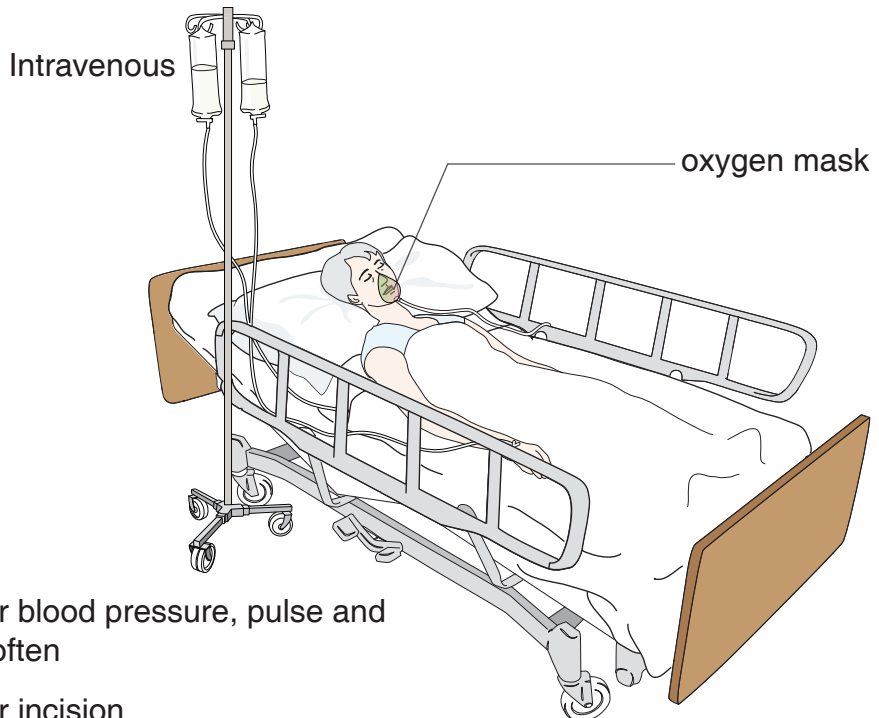


In the Post-Anesthesia Care Unit (PACU) - Recovery Room

After your surgery, you will wake up in the Post-Anesthesia Care Unit (PACU). This is a quiet area where patients are watched closely. You will be there for several hours.

You will have:

- An oxygen mask, that will be removed before you go to your room
- An intravenous (IV), giving you fluids



A nurse will:

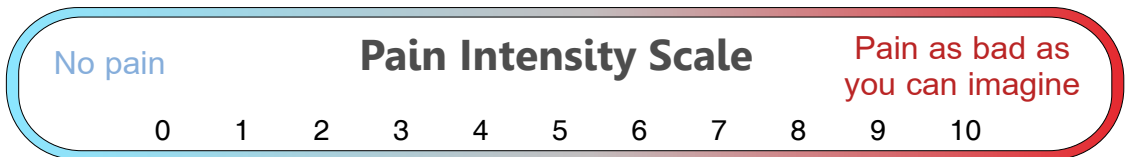
- Check your blood pressure, pulse and breathing often
- Check your incision
- Make sure you are comfortable

When you are ready, you will go to your room.

Your family may visit you once you are in your room.

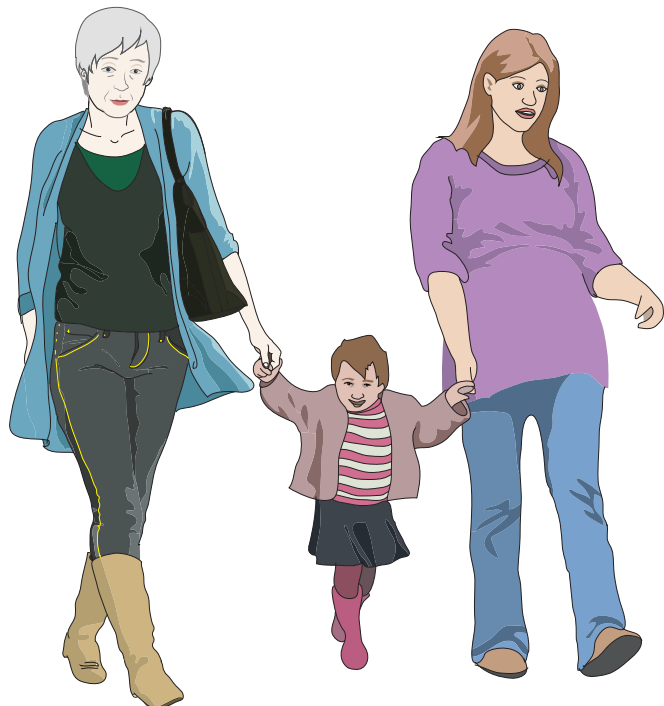
Pain Control

Your nurse may ask you to describe your pain using a number between 0 and 10. 0 means no pain and 10 is the worst pain you can imagine. We want to keep your pain below 4/10. Please tell us if you have pain. We will help you.



It is important to control your pain because it will help you to:

- Take deep breaths
- Move more easily
- Eat better
- Sleep well
- Recover faster

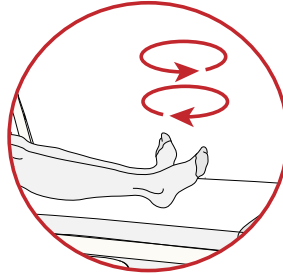


Exercises

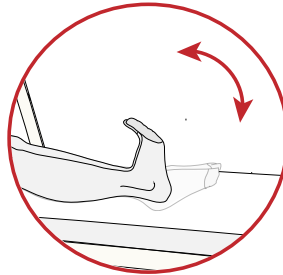
It is important to move around in bed to prevent pneumonia, blood clots and muscle weakness. Start these exercises when you wake up and continue them while you are in the hospital.

1. Leg exercises

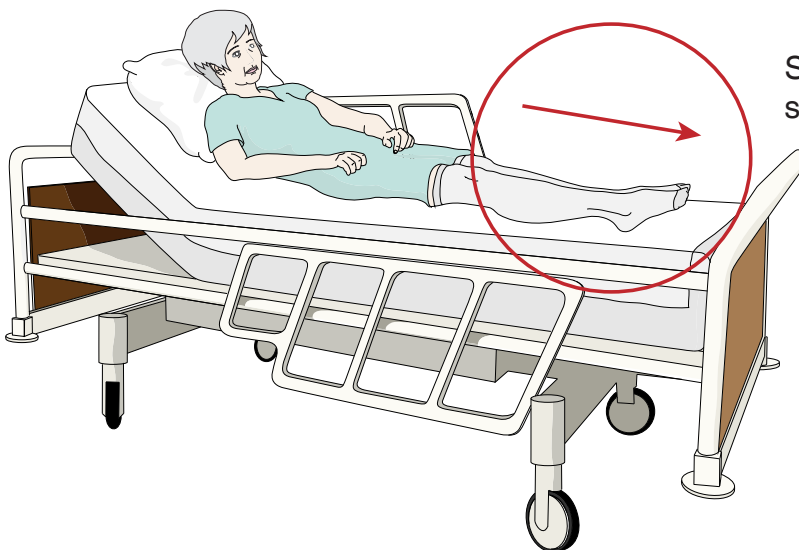
These exercises help your blood to circulate in your legs. Repeat each exercise 4 to 5 times every half hour while you are awake.



Rotate your feet to the right and left.

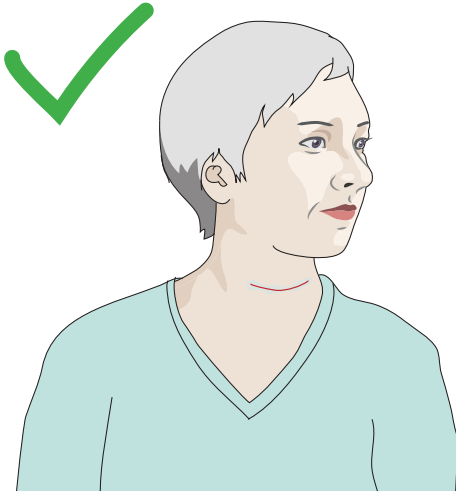


Wiggle your toes and bend your feet up and down.



Stretch your legs out straight.

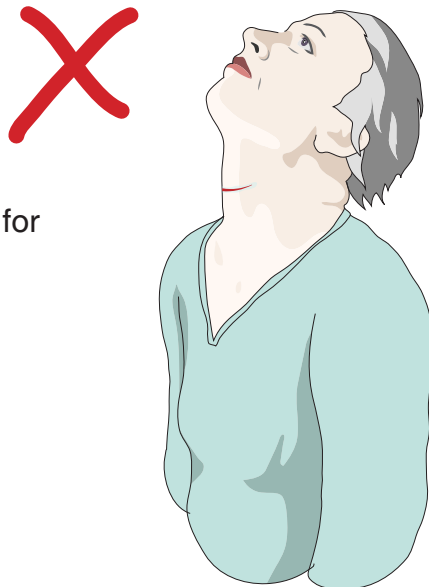
Exercises



2. Neck and shoulder movement

You may turn your head and move your shoulders normally. You will not hurt your incision by turning your neck from side to side or moving your shoulders.

Try not to tense your neck and shoulder muscles, or they will become sore.

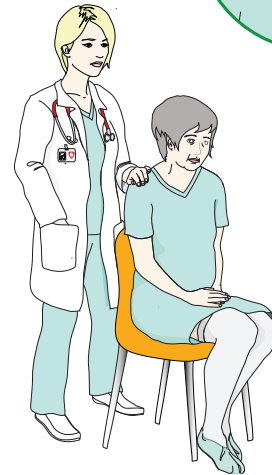
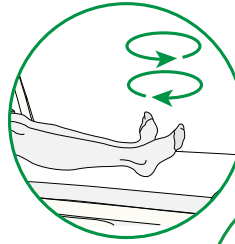


Do not hyperextend your neck for 1-2 weeks after surgery.

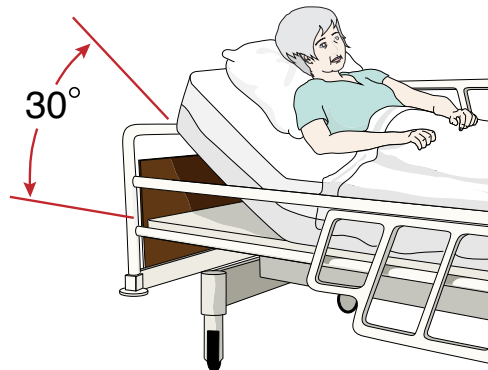
To Do the Evening of Your Surgery

Goals for the evening of surgery

- Do your leg exercises (see page 21)
- Move your neck and shoulders normally
- Get up and sit in a chair with your nurse's help
- Eat food and drink liquids, as tolerated



- Keep the head of your bed elevated 30 degrees



Goals of Day 1: Going Home

Goals for today

- Your IV will be removed when you are drinking well
- Sit in the chair for your meals
- Eat and drink as tolerated
- Plan to go home today before 11AM



You may need to take medicine to replace your thyroid hormone. This medicine should be taken once a day on an empty stomach. Do not eat for two hours after taking your thyroid pill.

Before you go home, your nurse will:

- Review your discharge instructions
- Answer your questions
- Give you an appointment to see your surgeon for a follow-up visit.



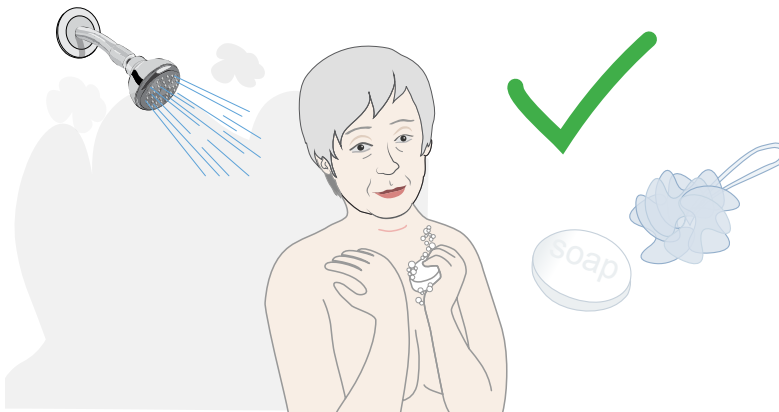
Surgeon's name: _____

Appointment date and time: _____

At Home

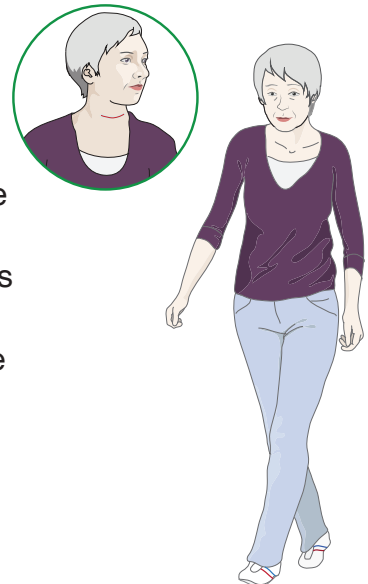
Incision

- If your incision is closed with skin glue, you may take a shower the day after your surgery
- If your incision is closed with steri strips, you may take a shower in 3 days
- Let the water run softly over your incision. Do not soak or scrub your incision. Gently pat it dry with a clean towel.



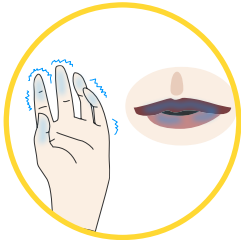
Activities

- Continue to walk several times each day
- Move your neck and shoulders normally, to reduce tension and prevent muscle pain
- Your surgeon will tell you when you may lift objects and return to work
- You may feel tired or weak if your thyroid hormone level is low. Your doctor may give you medicine to replace your thyroid hormone and give you more energy. It takes time for this medicine to reach its full effect.



When to Call Your Doctor

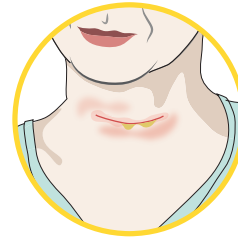
Call your surgeon if:



You feel tingling in your fingertips or around your mouth



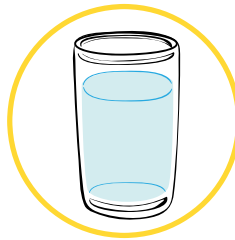
You have swelling in your neck that continues to expand



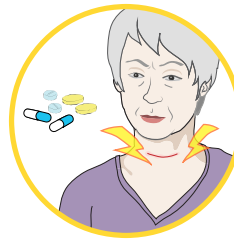
Your incision is warm, red, or you see drainage coming from your incision



You have a fever (greater than 38°C/100.4°F)



You cannot drink fluids or keep them down



You have pain that your pain medicine does not help



You are still very tired after 4-6 weeks

If you cannot reach your doctor, go to the nearest Emergency Department.

Contact information

Dr. Karen Kost: (514) 934-1934, ext 34971 or (514) 934-8018

Dr. Elliot Mitmaker: (514) 934-1934, ext 44337

Dr. Alex Mlynarek: (514) 934-1934, ext 34978 or 34971

Dr. Richard Payne: (514) 934-1934, ext 34971 or (514) 937-3687

Dr. Keith Richardson: (514) 934-1934, ext 34971

Dr. Roger Tabah: (514) 934-1934, ext 44337 ou (514) 932-4224

Dr. Anthony Zeitouni: (514) 934-1934, ext 34978

Suggestions to Help You Stop Smoking

There are four phases of quitting:

1. Preparing to quit
2. Choosing a quit date
3. Coping with withdrawal
4. Fighting relapses



Strategies to help you quit:

- Stop smoking now and you will already be on your way to quitting.
- Take it one day at a time. Think of yourself as a non-smoker. Be proud of what you have already done.
- Ask your family and friends not to smoke around you.
- Ask a family member, or a friend, to stop smoking at the same time.
- Join a stop-smoking group and kick the habit with other people.
- Speak with your doctor about aids to help you quit, such as the nicotine patch.

Get more information from:

Montreal Chest Hospital

(514) 934-1934 extension 32503

www.muhc.ca

Quebec Lung Association

(514) 287-7400 or 1-800-295-8111

www.pq.lung.ca



Hôpital Royal Victoria Hospital at the Glen site

1001 Decarie Blvd. Montreal, QC H4A 3J1

Centre universitaire
de santé McGill



McGill University
Health Centre

Registration, Surgery
and Intervention Centre:
C03.7055

Cafeteria:
Located off the Adult
Atrium on the S1 level

Pre-op Clinic:
DS1.2428

