

REMOVAL OF SUBMANDIBULAR GLAND

RISKS OF NON-TREATMENT

The risks of non-treatment depend on the nature of the problem with the gland. If you have questions about these risks, please discuss it with your surgeon.

DESCRIPTION OF SURGERY

Under general anesthesia, an incision is made in the neck below the lower edge of the jawbone. The gland is then dissected from the surrounding tissue and sent for evaluation by a pathologist. The incision is then closed with staples or sutures. Often, a drain is put in place to prevent blood from collecting in the neck. The drain is removed in 1-5 days depending on the amount of drainage. Removing the drain does not require anesthesia.

RISKS OF SURGERY INCLUDE BUT ARE NOT LIMITED TO THE FOLLOWING

The risks of surgery include bleeding, infection and scarring, the need for future procedures, the need for additional therapy, numbness or weakness to the face or tongue. There is a risk of numbness to the lower lip. There is a risk of collection of fluid under the skin. Some of these complications would require additional procedures to treat the complication.

RECOVERY TIME FROM SURGERY

Most people may go home on the day of surgery or the day after. After 10-14 days, most people can resume normal activity, but some may need more time to regain their strength.

POST-TREATMENT CARE

A physician should evaluate fever, chest pain or an elevated heart rate. After 24 hours it is okay to shower and get the incision site wet. There should be no straining or heavy lifting for at least two weeks. Antibiotics and pain medication should be taken as directed.