Your Care at Home After a Parotidectomy

Parotidectomy
Parotidectomy is surgery done to remove all or a part of your parotid gland. The parotid gland is a gland that makes saliva (spit). You have one in front of each ear. Saliva helps break down the food you eat.

In some cases, after taking out a parotid gland tumor, the facial nerve may be weakened short-term or, very rarely, long-term. The facial nerve is the nerve that controls your ability to close your eyes, raise your eyebrows and smile. The facial nerve goes through your parotid gland and divides it into 2 lobes: a superficial lobe (closest to your skin) and a deep lobe.

What to Expect
You will have either dissolvable or non-dissolvable stiches to close your incision. Non-dissolvable stitches will be removed at your first post op visit. If your surgeon used dissolvable stiches, you may have white strip tapes over your incision called steri-strips. Leave the steri-strips in place until your first post op visit.

You may have a drainage tube in place. The drainage tube may be removed the next day. You may still have drainage from the old drain site for the next day or two that may look blood-tinged to yellowish straw-colored. You may have a pressure dressing in place.

You will have some numbness, tingling, or decreased feeling around the incision site, and this may last for months after surgery. You may also have decreased movement of the muscles on that side of your face. This is due to swelling and is short-term, so it should improve usually within 4-6 weeks. Your doctor will tell you if surgery has any lasting effect on the facial nerve.

You may have numbness of the ear lobe that may be permanent.

Expect soreness when you chew foods. You may want to eat softer foods, so you don't have to chew as much. You may also want to take your pain medicine about 30 minutes before eating to help reduce the pain.

Incision Care
Your surgeon will tell you how long you should keep a pressure dressing in place, if one you have one. You can apply a gauze bandage to the drain site until there is no more drainage.

You may shower 24-48 hours after the drainage tube has been removed and you are done wearing the pressure dressing. Wash around the incision gently with soap and water, rinse and pat dry. If you have steri-strips, they can get wet in the shower. **Do not** soak the incision under water. Your surgeon will tell you if you should apply white petroleum jelly (Vaseline®) to your incision. **Do not** apply Vaseline® if you have steri-strips in place.

Activity
For 1 week, keep your head raised at least 30° when you lie down. Use at least 2 pillows to raise your head.

Avoid strenuous activity for 2 weeks. No jogging, aerobics, swimming, or lifting more than 10 pounds. Walk as much as you can.

No driving 48 hours after surgery or as long as you continue to use narcotic pain medicine.

Avoid sun exposure for 3 months following surgery. You can wear sunscreen at the surgery site 2 weeks after surgery.

Pain
The amount of pain after surgery varies for each patient. You can take acetaminophen (Tylenol®) as directed to decrease your pain. We will give you a prescription for an opioid pain medicine to use if Tylenol® is not enough. **Do not** drive or drink alcohol while taking any opioid pain medicine.

Do not take aspirin, ibuprofen, or other blood-thinning products until your doctor says you can.

You will likely have decreased feeling in the skin around your incision. **Do not** use a heating pad or an ice pack around your surgery incision. These may burn your skin.

When to Call

- Extreme bleeding, bleeding that soaks a gauze dressing in 10 minutes or less and keeps soaking the gauze dressings for one hour.
- Fever greater than 100.5º F for two readings taken 4 hours apart.
- Pain that is not relieved by medicine.
- Any signs of infection. Watch for spreading redness, increased swelling, pain, fever/chills or pus like drainage from the surgery site.
- Increased swelling of your face or neck.
- Any changes in facial movement (e.g. facial droop on one side that wasn't present after surgery or is worse than it was at first).
- If you have new eye irritation or not able to close your eye.
- Any questions or problems once you are home.

Who to Call
ENT Clinic
Monday to Friday - 8:00 am to 5:00 pm
(608) 263-6190

After hours and weekends, the clinic number will give you the paging operator. Ask for the ENT doctor on-call. Leave your name, area code and phone number. The doctor will call you back.

Toll free number: **1-800-323-8942**.

Your health care team may have given you this information as part of your care. If so, please use it and call if you have any questions. If this information was not given to you as part of your care, please check with your doctor. This is not medical advice. This is not to be used for diagnosis or treatment of any medical condition. Because each person's health needs are different, you should talk with your doctor or others on your health care team when using this information. If you have an emergency, please call 911. Copyright © 12/2025 University of Wisconsin Hospitals and Clinics Authority. All rights reserved. Produced by the Department of Nursing. HF#5320.