

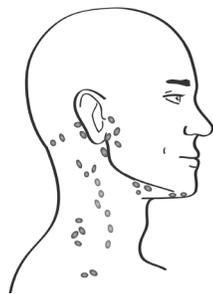
Head and neck cancer can spread to nearby lymph nodes, which are part of your immune system. When this happens, you will need surgery to remove lymph nodes close to the cancer.

The surgeon will send the removed lymph nodes to be tested for cancer. This is part of staging the cancer—showing how much cancer there is and how far it has spread.

The amount of tissue removed from your neck depends on several things:

- Type of cancer you have
- Size of the cancer tumor
- Location of the cancer

Your care team will talk with you about the details before your surgery.



Gray dots show location of lymph nodes of the head and neck.

Possible Side Effects and What You Can Do

Pain. After any surgery, some pain is normal. While you are in the hospital, your care team will do their best to help control your pain. They will ask you often about how much pain you are feeling. This helps your care team decide what pain medicines will work best for you. They may put pain medicine directly into your veins through an IV or give you pills.

When you go home, you will get a prescription for the same pain pills you took in the hospital. Follow the directions for your medicines. Tell your care team if your pain level stays the same or gets worse.

Infection. Any time you have a cut in your skin, there is a risk of infection. Good hand washing is the best and easiest way to prevent infection. Wash or disinfect your hands often, especially after using the bathroom, before eating, and before touching the area of your surgery. Make sure your caregivers and visitors do, too.

Watch for these signs that show an infection may be starting:

- More pain, redness, or warmth at your surgery area
- More blood or fluid coming from your surgery area
- A fever higher than 100.3° F

If you notice any of these signs, call your care team right away.

Swelling. Swelling around the surgery area can cause pressure on your throat. This can make it hard to breathe. The surgeon will put tubes to drain fluids from the surgery area to help prevent swelling. While you are in the hospital, nurses will connect a suction device to the tubes to help remove the fluid. Your nurses will check the fluid often to make sure there is no sign of an infection.

Swelling can also make it hard to swallow. The swelling should get better a few days after surgery. Tell your care team or speech and swallowing therapist if you cannot drink liquids or if you have questions about what you should eat and drink.

Bleeding. Your head and neck have many blood vessels, so bleeding is a risk during this surgery. Your nurses will check the fluid from the drain tubes for signs of too much bleeding. Some bleeding is common right after surgery, but the fluid that drains becomes more yellow as you heal.

Pneumonia. Pneumonia is a very serious lung infection. Staying in bed too much keeps your lungs from expanding all the way. This can raise the risk of getting pneumonia after surgery. To help prevent pneumonia, your nurses will ask you to start walking as soon after your surgery as it is safe. This helps keep your lungs in good shape.

Blood clots. Not being active raises the risk of blood clots in your legs. If a clot happens, it can move through the veins to your lungs. This can be deadly. To help prevent blood clots, your nurses will ask you to get up and move around as much as you can. While you are in the hospital, your care team may put foam boots on your legs. The boots inflate and deflate to keep the blood in your leg veins moving so it cannot clot. Your doctor may also prescribe a blood thinner medicine to help prevent blood clots.

If you have questions or concerns, please call:

Monday–Friday, 8 a.m.–5 p.m.

Head and Neck Nurse Line 801-587-4566

After hours, weekends, and holidays

University Hospital Operator 801-581-2121

Ask for the ear, nose, and throat doctor on call.