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Operation Information

Submandibular Gland Resection

Introduction

The submandibular glands are a pair of salivary glands that are located below the lower jaw. Saliva is produced and drained from the gland through a duct that opens under the tongue. The major indication of this procedure is the submandibular gland tumor. Recurrent infection caused by stones blockage may also be considered.

Outcomes

Complete removal of the disease is achieved. The removed gland may be sent to the laboratory for final pathological diagnosis.

Procedures

1. The operation is performed under general anaesthesia.
2. An incision is made over the neck.
3. The submandibular gland and tumor are removed.
4. A drainage tube may be inserted.
5. The wound is closed with stitches and covered by a sterile dressing.

Possible Risks and Complications

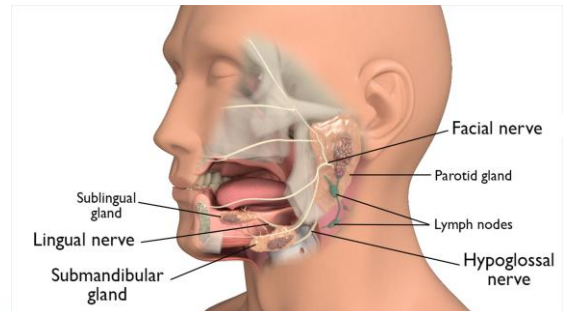
Common risks and complications

1. Infection
2. Bleeding
3. Swelling or bruises
4. Scar formation
5. Numbness of skin around the wound

Uncommon risks with serious consequences

6. Damage to the facial nerve resulting in facial and mouth asymmetry
7. Damage to the lingual and hypoglossal nerves causing impairment of tongue movement and swallowing, loss of taste and sensation in the anterior tongue
8. Retained stone in duct causing infection
9. Significant bleeding due to damage to major vessels
10. Haematoma formation

** The risks listed above are in general terms and the possibility of complications is not exhaustive. Please understand that even though all operations are carried out with utmost professionalism and care, this does not rule out the possibility of complications from arising.



Source:

<https://www.headandneckcancer.org.au/head-and-neck-cancer-types/salivary-gland-cancer>

Pre-operative Preparations

1. Good hygiene can prevent surgical wound infection. Therefore, we advise you to clean up yourself on the day of operation.
2. The procedure and possible complications will be explained by the doctor and a consent form must be signed prior to the operation.
3. Please inform the doctor and nurse all your past medical history, previous surgical operations, current medication and any complication with drug or anaesthesia. Please inform doctor if you are taking medications that affect blood coagulation, such as Aspirin, Warfarin, Xarelto or Pradaxa, herbs and dietary supplement.
4. Routine tests such as blood tests, ECG, X-ray and CT scan may be performed.
5. No food or drink six hours before the operation.
6. A mark is put on your skin to indicate the site to be operated. Do not wash off the marking.

Post-operative Instructions

1. After general anaesthesia, you may:
 - experience discomfort in the throat after tracheal intubation.
 - experience side effects of anaesthesia including feeling tired, drowsy, nausea or vomiting. Inform the nurse if symptoms persist or worsen.
2. In general, diet is allowed gradually after recovery from anaesthesia. Swallowing may be difficult for a few days. Try cool liquid and soft food.
3. Keep wound dressing dry and clean. Stitches will be removed in a week.
4. A wound drain may be present to remove fluid from the area of surgery. It will be removed in 1-2 days after operation.

Advice on Discharge

1. Please comply with the medication regime as prescribed by your doctor.
2. Keep the wound clean and dry.
3. Avoid strenuous activities for a week.
4. Immediately consult your doctor or return to hospital for professional attention in the event of worsening of wound condition such as swelling, bleeding or pus drainage, increased swallowing difficulty, impaired of tongue sensation or movement, weakness of lower lip, shivering, high fever over 38°C or 100.4°F, or any other unusual symptoms.
5. Any follow-up consultations should be attended as scheduled.

Should there be any enquiries or concerns, please consult the attending doctor.

Under the professional care of the doctor, you will gradually recover. We wish you all the best during your treatment and recovery.

If you have any questions after reading the entire leaflet, please write them down in the spaces provided in order for the doctor to further follow-up.

Compiled by Union Hospital Operating Theatre (OT) Governance Committee

The above information is for reference only, please enquire your physician for details
Our Hospital reserves the RIGHT to amend any information in this leaflet without prior notification

