



Operation Information

Excision of Neck Mass

Introduction

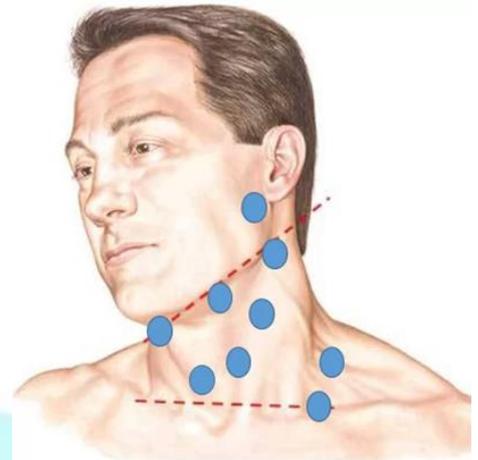
Excision of neck mass is an operation to remove a neck mass for diagnosis. The mass tissue will send to the Pathology Department for test.

Outcomes

1. Complete removal of the disease
2. Obtain tissue for histological diagnosis

Procedures

1. Depending on the size and site of the mass, the operation can be performed under general anaesthesia, local anaesthesia, monitored anaesthetic care or intravenous sedation.
2. An incision is made on the neck.
3. The neck mass is removed.
4. The wound is stitched.



Source:
<https://www.thomashosurgery.com/wp-content/uploads/2020/09/neck-lump-illustration-e1601209585797.png>

Possible Risks and Complications

1. Wound bleeding
2. Wound infection
3. Shoulder pain and weakness
4. Numbness of neck skin
5. Hypertrophic scar or keloid formation
6. Skin necrosis
7. Damage to the nerve
8. Pneumothorax
9. Chyle leakage
10. Lymphedema

** 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 arising.

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 procedure.
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 and Chinese medication or dietary supplements.
4. No food or drink six hours before operation. (For general anaesthesia only)
5. Please change into a surgical gown after removing all belongings including undergarments, dentures, jewellery and contact lenses.
6. Please empty your bladder before the operation.

Post-operative Instructions

General

1. A drainage tube may be inserted if necessary.
2. Head should be elevated to reduce bruising and swelling.
3. Prescribed pain medication may be taken as needed.
4. You can be discharged on the same or the next day.

Wound Care

1. The wound should be kept clean and dry.
2. A scar is visible on the neck, but it will fade after several months.

Diet

A normal diet may be resumed as instructed after recovery from general anaesthesia.

Activity

Light activities can be resumed for the following week.

Advice on Discharge

1. Immediately consult your doctor or return to hospital for professional attention in the event of severe wound pain associated with redness and swelling, collapse, massive bleeding, shivering, high fever over 38°C or 100.4°F, or any other unusual symptoms etc.
2. 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

