



Stephanie Jo Herrera, M.D.

## Post-Operative and Discharge Instructions

### Parotid Surgery

1. No heavy lifting (>10 lbs.) for two weeks.
2. Bathe only. Keep neck dry until drain is removed by Dr. Herrera.
3. Diet as tolerated.
4. Pain medications: Hydrocodone/APAP every six hours as needed. May alternate with Ibuprofen 600mg every six hours if needed. May take regular Tylenol (OTC) INSTEAD of hydrocodone/APAP if pain is mild. Contact Dr. Herrera's office if pain is not controlled to tolerable level.
5. Take Colace (OTC) twice daily as a stool softener to prevent constipation while taking hydrocodone. Increase your fluid intake. You may also use fiber supplements such as Benefiber or Metamucil. If you have loose stools, stop fiber and Colace but continue taking lots of fluids to prevent dehydration. If loose stools persist for more than 2-3 days, contact Dr. Herrera's office.
6. Empty drain and record output twice daily. When evening and morning total is less than 30mL (two tablespoons), return to Dr. Herrera's office at 8:30 a.m. for removal. You do not require an appointment. This usually occurs 3-4 days after surgery, typically on Monday or Tuesday.
7. The incision should be cleaned twice daily with hydrogen peroxide or saline and a Q-tip to remove all crusting/scabs. Pat dry. Apply triple antibiotic ointment (OTC), such as Neosporin, to the incision to keep moist. Perform twice daily.
8. Contact Dr. Herrera's office for swelling, redness or increasing pain, fever >100.4, difficulty swallowing or other concerns. (979) 299-1520.