

Mandibulectomy

Post-Operative Instructions

What can I expect after surgery?

A Mandibulectomy is the partial removal of the lower Jaw bone. Patients are usually in the Intensive care unit 5D for a couple of days and are then transferred to 8C. The average hospital stay is up to 7 days.

The patient will have a Foley catheter (to drain your bladder) in place after surgery. The catheter will be removed when the patient is out of the ICU and up walking around.

Patients will have a dohoff tube (tube placed in the nose) or a Peg tube (tube placed in the abdomen). The dohoff tube is only temporary and used for nutrition and medications while the incision site heals. The dohoff tube is usually in place for 2-4 weeks.

Some patients will have a tracheotomy, it is more common if having a bilateral (both sides) neck dissection or having a complex reconstruction. If you do have a tracheotomy it is only temporary and usually necessary for 3 weeks to 3 months.

A mandibulectomy may have a Pectoralis (chest), fibula (leg), iliac crest (hip), rib or a reconstruction plate used to reconstruct the mandibular bone that was removed during surgery. In certain circumstances the jaw may not be reconstructed at the time of surgery.

How do I take care of my incision?

- Patients can take a bath or shower 48 hours after surgery, but are not

allowed to submerge the wounds.

- If you have a tracheostomy, avoid baths and do not allow the shower water to enter the tracheostomy.

What should my activity level be?

- Patients can plan on being off work for at least 2 weeks. This may be extended by your surgeon as needed depending on the reconstructive method chosen

Are there diet restrictions after surgery?

- Before discharge from the hospital a dietician will discuss nutrition needs.
- Some patients may need to pass a swallow study before the dobhoff tube is removed or being allowed anything by mouth.
- Patients will be taught to administer tube feedings while at home.
- Patients will be instructed to take nothing by mouth until given the ok by the surgeon.
- Some patients may be on a liquid diet.

How do I manage pain after surgery?

- All medications will need to be liquid or crushed to pass through the dobhoff or Peg tube.
- Some medications taken prior to surgery may be discontinued and some new medications may be added until the dobhoff tube is removed.

What follow-up care will I receive?

- The first post-operative appointment should be within one week after discharge and should be made at the time of discharge.
- Biopsy results will be discussed at your first post-operative appointment.
- Physical therapy and Occupational therapy will work with you after

surgery if necessary.

- Speech therapy will work with you if necessary.

When should I call my doctor?

- If you have increased swelling or bruising.
- If you have severe or increased pain not relieved by medication.
- If you have any side effects to medications; such as, rash, nausea, headache, vomiting, increased irritability, or constipation.
- If you have an oral temperature over 100.5 degrees. Check to make sure they are getting enough liquids. Dehydration can cause the body temperature to rise.

Who should I call if I have questions?

- (734) 936-5950, Monday - Friday, 8 a.m. - 4:30 p.m.
- After hours and on weekends, call Hospital Paging at (734) 936-6267 and ask for the Oral & Maxillofacial Surgeon on call.

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