

Maxillectomy

Post-Operative Instructions

What can I expect after surgery?

- A Maxillectomy is the partial removal of the upper Jaw bone. Patients may be on 4B or rarely the Intensive care unit 5D. The patient will have a Foley catheter (to drain your bladder) in place after surgery. The catheter will be removed when the patient is up walking around. The average hospital stay is up to 7 days.
- Some patients may require 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 maxillectomy will occasionally result in an obturator (denture that replaces the bone and gum tissue removed during surgery) or a flap after surgery. An obturator is used to seal off the area so you are able to eat/speak/swallow. A Prostodontist will work with you to make sure that your obturator fits correctly.

How do I take care of my incision?

- A patient can take a bath or shower 48 hours after surgery, but are not allowed to submerge the wounds.
- If you have a tracheotomy, avoid baths. You may shower with your back facing the water. Do not allow water directly on your tracheotomy.

What should my activity level be?

- Patients can plan on being off work for 2 weeks. This may be extended by your surgeon as needed.

Are there diet restrictions after surgery?

- Some patients will be on a liquid diet while others will require a feeding tube through the nose.
- The feeding tube that is placed in the nose is called a dobhoff tube. The dobhoff tube is only temporary and used for nutrition and medications while the incision site heals.
- The dobhoff tube is usually in place for 2-4 weeks. 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. 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.

How do I manage medications after surgery?

- Your pain will be managed throughout the post-operative period. You should expect that there may be some discomfort in the process.
- All medications will need to be liquid or crushed to pass through the dobhoff.
- 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 after surgery 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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