A guide to your

Major Head and Neck Surgery - Part 1



This booklet will help you understand and prepare for your surgery.

Bring this booklet with you on the day of your surgery.

www.muhcpatienteducation.ca





This booklet was developed by the MUHC Surgical Recovery (SURE) working group.

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IMPORTANT

Information provided by this booklet is for educational purposes. It is not intended to replace the advice or instruction of a professional healthcare practitioner, or to substitute medical care. Contact a qualified healthcare practitioner if you have any questions concerning your care.



This material is also available through the MUHC Patient Education Office website www.muhcpatienteducation.ca







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What is a care pathway?

When you go to the hospital for your major head and neck surgery, you will be part of a **Care Pathway** program. The Care Pathway program helps you get better quickly and safely. Your health care team worked together to create this pathway.

This booklet (Part 1) will:

Help you understand and prepare for your surgery

The next booklet (Part 2) will:

- Explain what you can do to get better, faster
- Give you goals for every day that you are in the hospital
- Give you information for when you return home

Research shows that you will recover faster if you do the things that are part of the Care Pathway explained in this booklet. There are instructions about eating and drinking, physical activity, and controlling your pain. These things will help you feel better faster and go home sooner.

Bring this booklet with you on the day of your surgery. Use it as a guide during your hospital stay. Hospital staff will review it as you recover and before you go home.

Having surgery can be stressful for patients and their families. The good news is that you are not alone. We will support you each step of the way.

Please ask us if you have questions about your care.





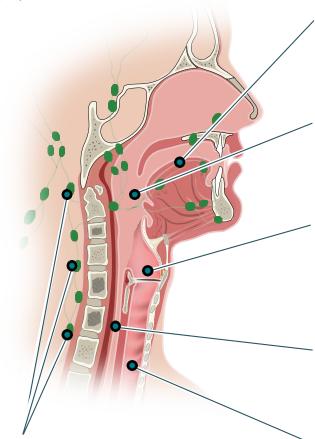
If you are not comfortable with English or French, try to have someone with your during your clinic visits and hospital stay who can help you understand.

1

What is the head and neck anatomy?

Neck

The neck connects your head and your chest. There are important body parts in the neck. These include the tongue, pharynx, larynx, esophagus, trachea and lymph nodes.



Tongue

The tongue is an organ made of muscle. You use it to talk, taste food, chew and swallow.

Pharynx

The pharynx is also called the throat. It is what you use to swallow food and liquids.

Larynx

The larynx is called your voice box. It allows you to make sounds when you speak. It also stops food from getting into your lungs.

Esophagus

The esophagus is a tube that allows food to get into your stomach.

Lymph nodes

Lymph nodes work like small filters. They help remove things like viruses and cancer cells from your body. They look like little beans. There are hundreds of lymph nodes in your body. They work together to form the lymphatic system.

Trachea

The trachea is your windpipe. It lets air into your lungs.

This booklet explains different types of major head and neck surgery. Your surgery could include one or more of these procedures.

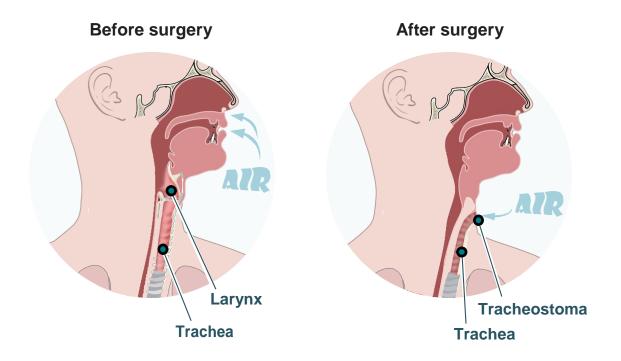
Your surgeon will tell you which of these you will have.

1. Total laryngectomy

A total laryngectomy is when the **larynx** (voice box) is removed. Your surgeon will make a cut in your neck. Then, they will move your **trachea** (windpipe) to this opening in your neck. This opening is called a **tracheostoma**. You will breathe through this opening.

This booklet tells you more about this surgery and what happens after it: Laryngectomy Care for patients, families, and friends booklet

http://www.muhcpatienteducation.ca/pdf-guide.html?guideID=809



2 Free flap free reconstruction

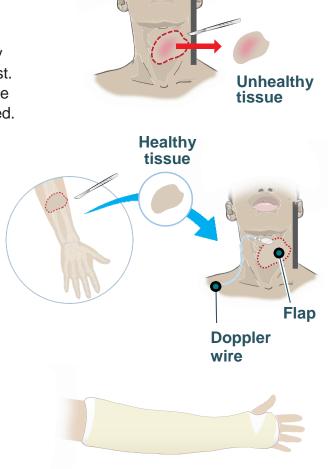
A flap reconstruction is a surgery that helps to cover an area where you had surgery. There are different types of flap reconstruction. Your surgeon will tell you which one you are having.

First, your surgeon will remove the **unhealthy tissue**. This could include skin, fat, muscle or bone.

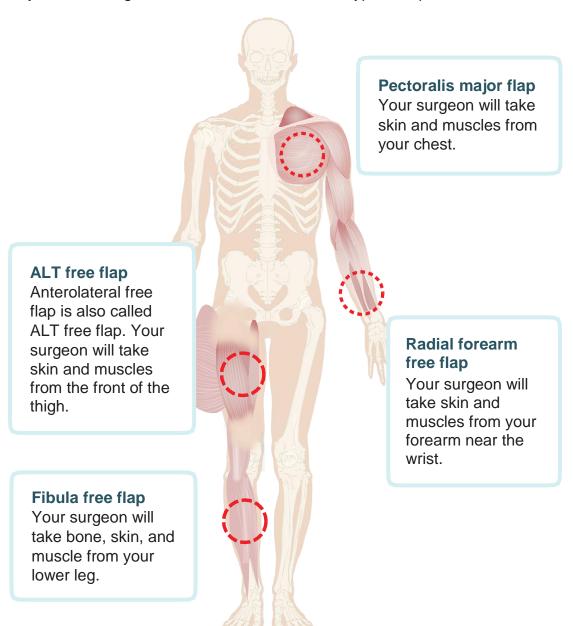
Then, they will take some healthy tissue from your leg, arm, or chest. This healthy tissue will replace the unhealthy tissue that was removed. This is called the **flap**. To make sure there is good blood flow to your flap, the surgeon will place a temporary wire in your neck, called a **Doppler wire**. The flap replaces the unhealthy tissue that was removed.

To replace the tissue taken from the flap, your surgeon will take a piece of skin, usually from the thigh. This is called a **skin graft**. A dressing will be used to cover this area.

Finally, your surgeon will cover the area of the skin graft with a dressing and/or a cast.



There are different types of flap reconstruction. Your surgeon will tell you which one you are having. These are the most common type of flaps.



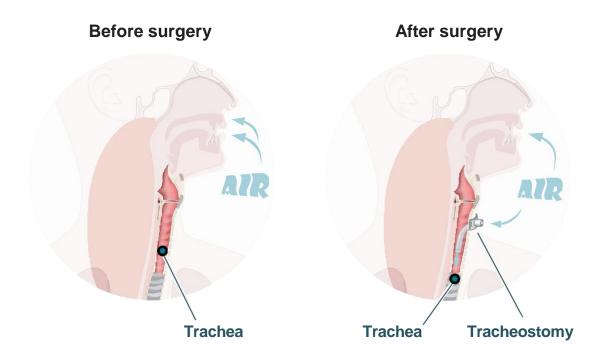
3. Tracheostomy

A tracheostomy, also called a tracheotomy, is a surgical opening made in the **trachea** (windpipe) to help you breathe easier. A tracheostomy tube is placed into the opening to keep it open. The tube allows you to breath in air directly into your trachea.

The tracheostomy is usually temporary. If you go home with one, the booklet below will tell you more about it.

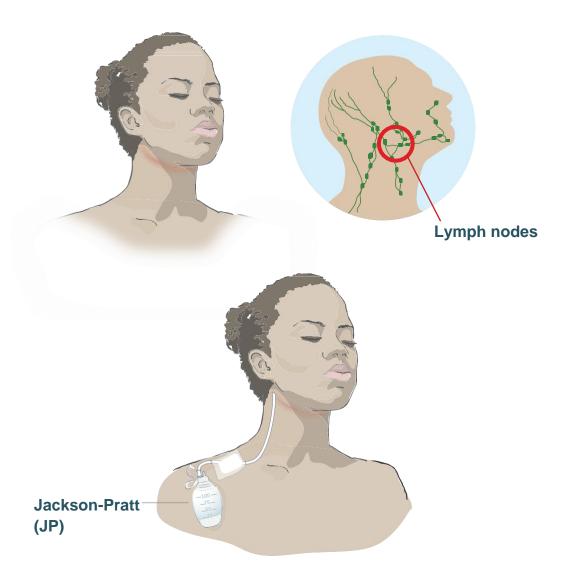
Tracheostomy Care for patients, families, and friends booklet

http://www.muhcpatienteducation.ca/pdf-guide.html?guideID=548



4. Neck dissection

Neck dissection is a surgery to take out the **lymph nodes** from your neck. After we take out the lymph nodes, we put a 1 or 2 drains (tubes) in your neck. This drain is called a **Jackson-Pratt (JP)**. It helps remove blood and fluid from your body. The drain will be removed before you go home.



Who are the members of your head and neck team?

You are the most important member of the head and neck team.

You can play an active role in your health by:

- Understanding your medical condition
- Following advice we give you
- Being involved in your care

Who are the other members of the head and neck team?

Your head and neck team includes doctors, nurses and other health professionals. They work together to help you get better. You will have regular contact with different members of the head and neck team.

Doctors

The **surgeon** is the doctor who will do your head and neck surgery. They will also be involved in your care after surgery.

The **oncologist** is a cancer specialist. They use medication called chemotherapy, radiation and immunotherapy to help your body get rid of cancer.





Who are the members of your head and neck team?

Nurses

Unit nurses will care for you while you are in the hospital.

The **pivot nurse** makes sure that all the health care professionals involved in your care work together.

The nurse in advanced clinical practice or assistant nurse manager helps you prepare for when you go home.

The **liaison nurse** coordinates your health care with your CLSC when you are at home. They can also refer you to other community resources if needed.



Other members of your head and neck team

The **speech language pathologist** will help you get back to eating, drinking and talking (or communicating) after your surgery.

The **nutritionist** will give you advice about what you can eat before and after your surgery.

The **respiratory therapist** will make sure you are able to breathe normally during and after your surgery.

The **physiotherapist** will teach you to do exercises to get your strength and mobility back and to stay strong after your surgery.

The **occupational therapist** will teach you how to manage in your daily routine at home or at work.

The **social worker** will help you and your family cope with any emotional, social and financial difficulties.





Follow up

If you have any questions, please phone us.

Dr. Kost	
Dr. Mascarella	514 942 2000 ovt 2
Dr. Richardson	514-843-2099, ext. 2
Dr. Sadeghi	
Dr. Zeitouni	

Other surgeon:	

Head and neck pivot nurse:

Speech language pathogist:

Name:	Phone:	514-934	-8028

Room D04.7510 (Block D, level 4)

Nutritionist:

Name:	Phone: 514-934-1934, ext.	

Other phone numbers:

Surgical North Clinic – ENT Clinic

Tel: 514-843-2099, ext. 2

Room: DS1. 3310 (Block D, level S1) Email: rvhhead.neck@much.mcgill.ca

Cedar Cancer Centre

Tel: 514-934-4400

Room: DRC.1438 (Block D, level RC)

MUHC Appointment and Referral Centre

Tel: 514-934-8488 (Monday to Friday from 8 a.m. to 5 p.m.)

Info-Santé

Tel: 811 (Contact a nurse for non-urgent health issue,24 hours a day, and 365 days a year)

Glen site parking information

Note that these rates were in effect in May 2018 and could have changed since the printing of this booklet.

For any updated information, visit:

https://muhc.ca/patient-and-visitor-parking#glen



Daily Rate

Less than 2 hours **FREE**2h-3h59 **\$6**4-24 hours **\$10**

Parking Pass Rate

7 days **\$45** 30 days **\$90** *

Parking Rate for Frequent User *

A frequent user is an out-patient who visits the hospital by car for their appointments or treatments at least ten (10) times per month.

7 days **\$22.50** 30 days **\$45**

Unlimited entry and exit at the hospital where the pass was purchased. Certain conditions apply

10 visits (flexible) \$30

1 entry and 1 exit per visit, no expiry date

Where to Pay



By debit card or credit card Visa or MasterCard **Customer Service Parking Offi ce**



By credit card Visa or MasterCard

Barrier gate at exit (hourly parking only)

Contact Us



Parking Service Desks	Location	Extension
Montreal General Hospital	L6 - 129	43626
Lachine Hospital	OJ4	77001
Royal Victoria Hospital	D RC.1000	32330
Montreal Chest Institute	D RC.1000	32330
Montreal Children's Hospital	A RC.1000	23427
Montreal Neurological Hospital	E3-61	34625

^{*} These parking rates do not apply to the staff nor its physicians.

Resources

Notes		

Map of Royal Victoria Hospital - Glen site

