

RISKS AND COMPLICATIONS OF NECK EXPLORATION

Purpose of Surgery: _____

Alternative Treatment: _____

There are many indications to explore a neck, including but not limited to: removing a suspicious growth or growths, getting tissue to make a diagnosis, draining an infection or abscess, removing a *foreign* body, and looking for evidence of trauma.

As with any surgery, there are both potential benefits and risks. You must keep in mind that you may not benefit from the surgery. The following information will help you understand the risks of Neck Exploration. As with any operation, there may be some unanticipated complications in addition to those listed here.

Bleeding: Substantial bleeding requiring transfusion is extremely rare. A hematoma or collection of blood under the skin incision is unusual. Removal of the clot may require additional surgery and prolonged hospitalization.

Infection: Though infection is not common, it is a risk with any surgical procedure. Should infection occur, it may require prolonged treatment in or out of the hospital. Fortunately, this is a rare complication. A wound infection occurs in a few cases and is treated with antibiotics and drainage, and is usually not a serious problem.

Hoarseness / Swallowing Difficulty: The nerves controlling the vocal cords are located adjacent to the thyroid glands, the trachea and the esophagus, and in front of the cervical spine. Infrequently, the nerves that control the vocal cord movement may be injured during surgery, causing temporary or permanent vocal cord weakness and hoarseness. This may also cause problems with swallowing and aspiration (food or liquid going into the trachea and lungs). Extremely rarely, it would be necessary to place a tracheotomy (breathing hole in the neck) because of long-term problems with aspiration.

Nerve Injury: There are many nerves in the neck that provide sensation and control specific movements, including but not limited to: swallowing, speaking, tongue movement, shoulder movement and diaphragm movement. Although great care is exercised to identify and preserve these nerves, it is possible to have temporary or permanent loss of function of the nerves. Although temporary weakness or numbness can occur, it is uncommon. Permanent nerve injury is very uncommon, and could require additional surgery.

Esophageal Injury or Perforation: The esophagus (swallowing tube) is located deep within the neck between the trachea (airway) and the cervical spine. Rarely, the esophagus could be injured or perforated (a hole made between the swallowing tube and the neck). This may require additional surgery or temporary wound drainage.

Chyle Leak: Chyle is a milky substance produced by your lymphatic system (related to lymph nodes). Rarely, the ducts carrying this fluid may be injured. Neck surgery low in the neck is at greatest risk. This may require additional procedures or surgery to correct.

Numbness: A lack of sensation around the area of your incision is very common and can last for several months. In rare instances, the numbness can be permanent.