The parotid glands produce saliva, which moistens the mouth and the food you chew. There are two parotid glands, one on each side of the face located close to the ear.

What Is a Parotidectomy?
A parotidectomy is surgery to treat salivary gland cancer. It is also used to treat other types of cancer that spread to the salivary glands.

Your surgeon will remove the cancerous gland and may remove healthy tissue and lymph nodes around it. For more information about lymph node removal, see the Neck Dissection fact sheet. Removing this tissue helps your health care team learn more about your cancer and if other treatments are needed after surgery.

What Happens after Surgery?
You will stay in the hospital up to a few days after your surgery. Your health care team will closely monitor how you are doing and watch for any signs of complications.

What Are the Possible Complications?

Pain. After surgery, some pain is normal. While you are in the hospital, your health care team will do their best to control your pain. They will ask you often about how much pain you are feeling on a scale of 0-10, with 10 being the worst pain you can imagine. This helps your health care team decide what medicines will best relieve your pain. They may put pain medicine directly into your veins or give you pills, depending on what works best.

When you go home, you will receive a prescription for the same kinds of pain pills you took in the hospital. Follow the directions for your medications. Tell your health care team if your pain does not decrease or if it gets worse.

Infection. Whenever you have surgery there is a risk of infection. Good hand washing is the best and easiest way to prevent an infection. Wash your hands often and make sure your caregivers and visitors do, too.

Watch for these signs of an infection:
- Increased pain, redness, or warmth where you had surgery
- Increased drainage from your surgery wound
- A fever higher than 101°F

If you notice any of these signs, tell your nurse or doctor right away.

Swelling. Swelling around the surgical site can cause pressure on the throat and make it difficult to breathe. To decrease the swelling, the surgeon will place tubes that drain fluids from the site of your surgery. At first, a suction device connected to the tubes will help remove the fluid. Your nurses will check the drained fluids often to make sure there is no infection.

Swelling can also make it difficult to swallow. It should improve within several days after surgery. Tell your health care team if you are not able to drink liquids or if you have questions about your diet.

Bleeding. The neck has many blood vessels, so bleeding is always a risk during neck surgery. Your surgeon will place tubes in your neck to allow fluids to drain away and to reduce the swelling after surgery. Your nurses will check the drained fluid for signs of too much bleeding. Some bleeding is common right after surgery, but the drained fluid becomes more yellow as you heal.

Pneumonia. Lying in bed too much keeps your lungs from expanding fully. This raises the risk of getting pneumonia after surgery. To help prevent this, your nurses will ask you to start walking as soon after your surgery as it is safe.
The nurses will also give you a device called an incentive spirometer to exercise your lungs in the hospital and after you go home. To use it, you breathe out as deeply as you can and breathe in through the mouthpiece of the device. It measures how much air you breathe in. After you go home, use the device about every two hours. This helps to keep your lungs in good shape and prevent pneumonia.

**Blood clots.** Inactivity raises the risk that a blood clot will form in your legs. If a clot forms, it can move through the veins to your lungs. This can be deadly. To help prevent blood clots, your nurses will encourage you to get up and move around as much as you can. While you are in the hospital, your health care team may put foam boots on your legs. The boots inflate and deflate to keep the blood in your leg veins moving so it cannot clot. Your doctor may also prescribe a blood thinner.

If you have questions or concerns, talk with your health-care team. Also, visit or call the G. Mitchell Morris Cancer Learning Center (CLC), where you can talk with a cancer information specialist and find resources. The CLC is located on the sixth floor of Huntsman Cancer Institute and is open Monday through Friday, 8 a.m. to 5 p.m. Call 801-581-6365 or 1-888-424-2100 between 8 a.m. and 4 p.m.