

What to expect after surgery (Thyroidectomy)

- You will leave the hospital with a prescription for Levothyroxine (Synthroid). This is a thyroid hormone pill that will replace the normal function of your thyroid gland and will help to prevent symptoms of hypothyroidism (e.g. fatigue, constipation, feeling cold). You are to take this medication once a day. Only those patients who require Radioactive Iodine Ablation (RAI) treatment or a whole body scan will be advised to stop taking their medication for a period of time – **do not stop taking unless advised by your healthcare team.**
- You may receive a prescription for Calcium and/or Vitamin D if there were problems with low calcium levels following surgery.
- You will receive a lab requisition to check blood work and you can take this to a Lifelabs close to your home. The healthcare team will let you know when this should be completed.
- All patients will be seen by ENT clinic approximately one month after discharge. Further follow-up is discussed at this clinic visit.
- For those patients who **do not require RAI** you will be seen in endocrine clinic 4-6 weeks after discharge. Patients will be monitored every 6 months with a thyroid ultrasound and bloodwork.
- **For those patient requiring RAI**
 - a) Treatment will be scheduled 4-12 weeks following surgery. Be prepared to make many visits to the hospital for the treatment (3 days in a row the first week and then 1 day the following week).
 - b) A Low Iodine Diet will be required one week prior to treatment and continue for 2 days after treatment (see pamphlet included). Specific instructions will be provided to you by your endocrine nurse.
 - c) You will need to be isolated at home for one week following treatment. The Nuclear Medicine department will contact you 2-3 weeks before your RAI ablation treatment date to review the instructions and to be sure that you can abide by these recommendations.
 - d) Your nurse will contact you and mail out a package with detailed instructions.