

Hosp No. :	HKID No.:
Case No. :	
Name :	
DOB :	M / F
Adm Date :	
Contact No.:	

Procedure Information Sheet – Submandibular Gland Resection

1. Introduction

- 1.1. Excision of submandibular gland.
- 1.2. Indications
 - 1.2.1. Tumor
 - 1.2.2. Stone
 - 1.2.3 .Chronic infection, sialoadenitis

2. Procedural Preparation

- 2.1. It is possible to undergo preoperative examinations including *Computer Tomography (CT)* or Magnetic Resonance Imaging (MRI), blood tests, lung X-rays, and electrocardiogram.
- 2.2. The indication of operation, procedure and possible complications will be explained by the surgeon and consent will be signed.
- 2.3. Pre-operative anesthetic assessment will be performed. The anesthetic management and its possible risks will be explained by the anesthetist.
- 2.4. Inform your doctor for any drug allergy, regular medications or other medical conditions.
- 2.5. Do not eat or drink for 8 hours before operation.

3. Procedure

- 3.1. The operation is done under general anaesthesia.
- 3.2. Skin incision over the neck.
- 3.3. Excision of the submandibular gland stone or tumor.
- 3.4. Insertion of a drainage tube.
- 3.5. Closure of wound.

4. Recovery Phase

- 4.1. Drainage tube in the neck may be inserted and it can be removed a few days after the operation.
- 4.2. Temporarily stop eating irritating food to reduce saliva secretion stimulation, such as sour food.

5. Risks and Complications

- 5.1. Common Risks and Complications($\geq 1\%$ risk)
 - 5.1.1. Bleeding
 - 5.1.2. Infection
 - 5.1.3. Postoperative discomfort, swelling and possible bruises
 - 5.1.4. Scar formation
 - 5.1.5. Numbness of skin around wound
- 5.2. Uncommon Risks and Complications($< 1\%$ risk)
 - 5.2.1. Injury to facial nerve resulting in facial and mouth asymmetry
 - 5.2.2. Injury to lingual and hypoglossal nerves causing impairment of tongue movement and swallowing, loss of taste and sensation in the anterior tongue.
 - 5.2.3. Retained stone in duct causing infection
 - 5.2.4. Postoperative discomfort, swelling and possible bruises
 - 5.2.5. Significant bleeding due to damage of major vessels
 - 5.2.6. Haematoma formation

6. Follow up after surgery

- 6.1. Please follow up as scheduled.
- 6.2. Seek immediate medical attention if you have any excessive bleeding, collapse, severe pain, fever or signs of wound infection.



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7. Remark

7.1. The above-mentioned procedural information is not exhaustive, other unforeseen complications may occur in special patient groups or individual differently. Please contact your physician for further enquiry.

8. Reference

8.1. Hospital Authority. Smart Patient Website.

I acknowledged the above information concerning the operation or procedure. I have also been given the opportunity to ask questions and received adequate explanations concerning the condition and treatment plan.

Patient/ Relative Signature: _____

Patient/ Relative Name: _____

Date: _____

