



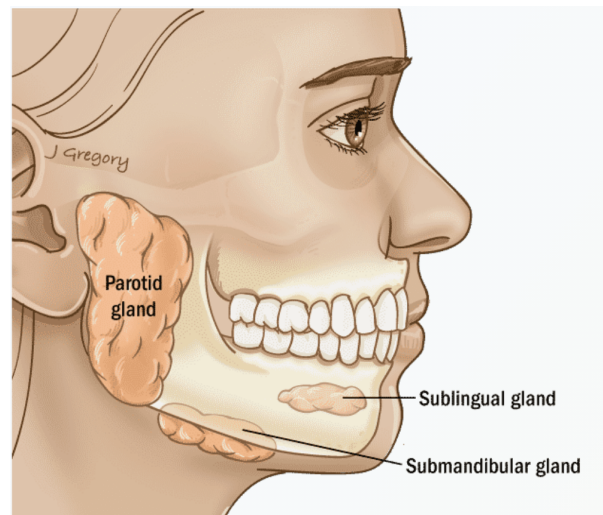
Submandibular Gland Resection

The submandibular gland is located in the neck underneath the jaw. The gland may need to be resected (removed) due to chronic infection, inflammatory disorders, or due to suspected tumor within the gland or surrounding lymph nodes.

Before Surgery

You will receive specific instructions on when you need to stop eating and drinking, and your medication regimen before surgery.

A few days before your operation, the anesthesiologist will ask you a few questions so that they can create a comprehensive anesthesia plan based on your medical history. On the day of your surgery, you will arrive at the hospital a few hours before your scheduled procedure. The nurses, anesthesiologist, and head and neck surgery team will check in with you. If you have any last minute questions, this is a good time to ask them.



The Surgery

General anesthesia will be used to put you to sleep during the surgery. The incision is usually made in the neck just below the jaw within a natural skin crease.



Please note that this information is intended for educational purposes. It does not replace consultation with your doctor, and it should not be interpreted as medical advice. We encourage you to speak to your health care provider if you have further questions or concerns regarding your medical care.

For more information scan this code or visit:

<https://thancguide.org/cancer-basics/treatments/surgery/ablative/submandibular/>

Risks Associated with Submandibular Gland Resection Surgery

- Bleeding, including hematoma (mild bleeding under the skin).
- Infection.
- Seroma (collection of normal body fluid under the skin).
- Sensory or motor disturbance of the tongue.

The **lingual nerve** supplies sensation to the front part of the tongue and runs in the area where the submandibular gland is located on both sides. Though rare, there is a possibility of injuring the nerve due to its close proximity to the gland.

The **hypoglossal nerve** controls the movement of half of the tongue. Running adjacent to the submandibular gland, there is also a minimal risk of injury to this nerve during surgery.

- Facial nerve injury, resulting in temporary or rarely permanent weakness of the lower lip.

After Surgery

When you wake up, you may have a drain in your neck to remove excess fluid and secondarily prevent infection. You will be given pain medications to alleviate pain. You may be discharged home the same day, or you may stay in the hospital for a night or more, depending on the extent of the surgery. A dedicated discharge planning team will work with your family to ensure you are properly cared for once you leave the hospital.



Please note that this information is intended for educational purposes. It does not replace consultation with your doctor, and it should not be interpreted as medical advice. We encourage you to speak to your health care provider if you have further questions or concerns regarding your medical care.

For more information scan this code or visit:

<https://thancquide.org/cancer-basics/treatments/surgery/ablative/submandibular/>