Division of Pediatric General Surgery

Thyroglossal Duct Cyst

A thyroglossal duct cyst originates from the normal descent of the thyroid gland and occurs anywhere along the tract from the base of the tongue down the midline of the neck to just above the thyroid cartilage. The lesions are usually painless and move with swallowing. This is often a day surgery procedure but sometimes it is necessary to stay overnight.

What will the incision look like?
There will be an incision across the middle of the neck with dissolving stitches and covered by “Super glue” or “Steristrips” (small white tapes). These tapes should fall off on their own in about one week. If they do not, remove them after ten days. Once the strips are off, you may see 2 ends of a stitch-looks like clear fishing line - exiting from the skin. You may clip these off at the level of the skin with small scissors, or wait several weeks when they will fall off on their own.

Will there be any pain?
Acetaminophen – Tylenol 15 mg.kg – is recommended for discomfort every four to six hours as needed. This begins after clear fluids have been tolerated.

What can my child eat after surgery?
Start with clear fluids – apple juice, Jell-O, water, popsicles- and advance to regular diet. Your child may prefer soft foods like puddings for several days.

Are there any activity restrictions?
On the day of surgery activity should be limited until all anesthetic effects have resolved. Your child should be supervised until this occurs – assisted up and down stairs, to the restroom, etc.

When can bathing begin?
Two days after the operation it is okay to sponge bathe or shower. Try not to soak the white tapes. If they get wet, just pat them dry. Full bathing and swimming is allowed after one week.

Follow-up?
An appointment can be made for 1 to 2 weeks after surgery. Please call the Pediatric surgery office at 206-215-2700.

If there is any sign of infection, drainage, pain, redness or swelling around the incision, please call the Pediatric surgery office at 206-215-2700.