



BRANCHIAL CLEFT CYST

What is a branchial cleft cyst?

Your child has a branchial cleft cyst, a common cyst that appears below the ear or along the side of the neck during early childhood. It is a leftover tube that usually goes away during development inside the womb.

Who gets a branchial cleft cyst?

This type of cyst formed on its own before your baby was born and there is nothing you could have done to prevent it from happening.

How is a branchial cleft cyst diagnosed?

The information you give the doctor plus the doctor's examination of the cyst are all that is needed to diagnose the problem.

How is the decision made that surgery is needed?

Having an operation to remove the cyst is necessary to prevent infection and to cure the problem. Branchial cleft cysts will not go away without an operation, and once they are removed, they probably will not return. The operation is performed in Day Surgery and your child will be able to go home several hours after the procedure. On rare occasions the child will need to stay in the hospital for observation if respiratory problems occur after the operation

What can I expect from surgery?.

Your child will have a small incision where the cyst was located.

What care is needed at home after surgery?

Care of the incision The stitches are below the skin and will dissolve over the next few months. The incision will be covered with either tape strips or clear glue-like stuff called collodion (pronounced *ka-LOAD-e-un*). Both will peel off on their own in about a week. A little redness along the incision is normal for several weeks.

Bathing: Sponge bathe the child for the first 3 days after the operation, then s/he may have a regular bath.

Diet: Your child may drink clear liquids when s/he is fully awake. Go slow and call the doctor if you notice the child having any difficulty with swallowing. If the child can take liquids without a problem, s/he may begin eating soft foods

about 8 hours after you get home. Avoid greasy and spicy foods for a couple of days.

Activity: The child's activity should be limited to quiet, indoor play for the first day after the operation. Avoid any activity that could cause the incision to get hit. If the child is on narcotic pain medicine, do not allow him/her to play on riding toys, playground equipment, or climb stairs. Full activity may be resumed after one week.

Medication: Please get your prescription(s) filled and follow the instructions for taking the medicine(s). The most commonly prescribed medicines after this operation are pain medication and antibiotics.

When should I call the surgery team?

You will be given an appointment for a follow-up visit with the surgeon about two weeks after the operation. If your child experiences any of the following problems, please call the appropriate resource:

Call 9-1-1 if your child experiences choking or cannot breathe.

Call the pediatric surgeon if you notice any of the following things:

- Difficulty swallowing
- Noisy or squeaky breathing
- Wheezing
- Hoarseness or voice changes
- Cannot move the tongue or taste anything.
- Fever of 101.5 degrees or higher
- Lots of redness and swelling around the incision
- Rash
- Bleeding
- Vomiting (especially with medication)

When can my child return to school or daycare?

School and P.E. attendance are related to the child's age at the time of the operation, and should be discussed with the surgeon before leaving the hospital.

Please reproduce and distribute this sheet to your surgery families. This teaching sheet can also be downloaded at www.APSNA.org.

Copyright 2006, M. Elizabeth Foster. Copied with permission by Jones and Bartlett Publishers, Sudbury, MA.