PATIENT INFORMATION

Adult Neck Mass Follow-up

QUESTION	ANSWER
Why do I need to know about my neck mass?	A neck mass is an abnormal lump in the neck. A neck mass may be caused by infection, benign tumor, or a cancerous tumor. A neck mass from infection should go away completely when the infection goes away. If it does not, your healthcare provider will help you to choose tests to determine the cause of your neck mass.
What should I do?	■ If you were given antibiotics, take them as prescribed. ■ Once each week, check the size of the neck mass using your fingertips. ■ Follow up with your provider to be sure that the neck mass decreases in size over time. ■ Be sure to follow through with any tests your provider ordered.
How do I check the size of my neck mass?	Once each week use your fingertips to check the size of the mass. How wide is the mass? One fingertip wide? Two fingertips wide? How does that compare to the size last time you checked? The mass should get smaller over time. A mass due to infection should go away completely typically in 2 or 3 weeks. Contact your provider if: ■ The mass gets larger ■ The mass does not go away completely. ■ The mass goes away but then comes back
What else should I look for?	Notify your provider if you have: ■ Difficulty or pain with swallowing ■ Change in voice ■ Neck pain or throat pain ■ Unexplained weight loss ■ Mouth sores or tooth pain ■ Fever over 101 degrees Fahrenheit ■ Ear pain or hearing loss on the same side as the lump in your neck
How should I follow up with my provider?	You and your provider may stay in contact by phone, through electronic messages, by mail, or in person at the provider's office. You may need to go back to your provider's office for a repeat examination. **No matter how you follow up with your provider, be sure that the mass has gone away. If the mass does not go away, your provider will help you decide what to do next.**

SOURCE: Pynnonen, MA, Gillespie, MB, Rosenfeld RM, et al. Clinical Practice Guideline: Evaluation of the Neck Mass in Adult. *Otolaryngol Head Neck Surg.* 2017; 157(2 Suppl):S1-S30.

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