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- neck masses :

- Very common
- Could be simple , serious
- What you need to know About head masses? History, PE, investigations
- History: HPI: age, duration and the site is important ! Smoking.
- P/E: flexible scope ! nose ,
- CT scan with contrast , then FNA .. Thyroid different US then FNA
- Infection : antibiotics
- Inflammatory : investigate

- thyroid gland:

Neck five levels of lymphnodes :

- Posterior triangle is level five
- Digastric muscle with the mandible level one
- Anterior jugular hyoid bone two
- Hyoid none omohyoid muscle three
- Omohyoid clavicle four
- 6 /7 superior mediastinum
- Carotid sheath : sympathetic trunk , common carotid artery , Hypoglossal N vagus N,
- Any neck mass in 40 y of age or above is malignancy until proven otherwise
- Any unilateral mass is also malignant until proven other wise
- RF: smoking , alcohol , family history in thyroid more !
- History :
 1. Age : mainly infection Or inflammatory
 2. Site : midline: thyroglossal duct cyst , lateral: , posterior
 3. Duration: short period : infections etc
- CT : character , shape , relation
- MRI: limited

- specious cyst for example benign

- branchial cyst : MCQ

- Tonsillar fossa is the origin in embryology!
- Never got infected that's why does not appear
- Surgery treatment

- thyroid CT scan : there is some exceptions --

- Midline neck mass :

- Thyroglossal duct : treatment is antibiotic if not cleared surgery : move part of hyoid bone) sis trunk procedure

Done !