Contents

1. Assessing the Vocal Cord Mobility 1
2. Some Worrisomes of Solitary Thyroid Nodule 2
3. Confirming the Lower Limit of Thyroid Gland 3
4. Assessment of Retrosternality 4
5. Minimal Retrosternal Extension 5
6. Massive Retrosternal Extension 6
7. Surface Marking for Thyroid Surgery 7
8. Forewarned is Forearmed 8
9. Benign Tumors Often Push the Trachea 9
10. Benign Pathology Often Push the Trachea 10
11. Marking of Incision 11
12. Horses for Courses 12
13. Incision and Mobilization of Skin Layers 13
14. Extension of Incision 14
15. Raising of Skin—Platysma Flap 15
16. Platysma is Usually Deficient in the Midline 16
17. External Jugular Vein 17
18. Anterior Jugular Vein 18
19. Median Cervical Vein 19
20. Variants of Anterior Jugular Vein 20
21. Landmarks for Midline 21
22. Pyramidal Lobe and Levator Glandulae Thyroideae 22
23. Division of Deep Fascia in Midline 23
24. Loose Areolar Tissue 24
25. Avoid Superficial Capsular Veins 25

26. Strap Muscles 26
27. General Layout of Strap Muscles 27
28. Strap Muscles 28
29. Surgical Relevance of Ansa Cervicalis 29
30. Dividing Strap Muscles 30
31. Ansa Cervicalis Segmental Supply 31
32. Nerve Supply of Strap Muscle 32
33. Mimicking the Deep Fascia 33
34. Elevation of Strap Superiorly 34
35. Lateral Approach 35
36. Posterolateral Mobilization 36
37. Middle Thyroid Vein 37
38. Middle Thyroid Vein (Short, Stumpy and Wide) 38
39. Middle Thyroid Vein 39
40. Learn Your Anatomy of Middle Thyroid Vein in Neck Dissections 40
41. Thyroid Veins 41
42. Kocher's Vein 42
43. Fourth Veins of Kocher 43
44. The Communicating Vessel 44
45. Superior Thyroid Pedicle 45
46. Upper Pole—Superior Thyroid Pedicle 46
47. Reconsider the Old Dictum—Superior Thyroid Artery 47
48. Anterior Branch of Superior Thyroid Artery 48
49. Respect the Tenor of the Speech 49
50. A Nerve that Sets You Apart 50
51. Superior Thyroid Vein 51
52. Additional Superior Thyroid Vein 52
53. Changing Axioms—Inferior Thyroid Artery 53
54. Branches of Inferior Thyroid Artery 54

55. Reasons to Protect the Inferior Thyroid Artery 55
56. The Saviour Artery of Both the Parathyroids—Inferior Thyroid Artery 56
57. Inferior Thyroid Artery Supplying Both Parathyroids 57
58. Inferior Thyroid Artery 58
59. Normal Anatomy of Recurrent Laryngeal Nerve 59
60. Recurrent Laryngeal Nerve (The Embryology-I) 60
61. Recurrent Laryngeal Nerve (The Embryology-II) 61
62. Revisiting the Anatomy of Recurrent Laryngeal Nerve/Inferior Thyroid Artery 62
63. Beginner's Guide to Recurrent Laryngeal Nerve—Beahr's Triangle 63
64. Beahr's Triangle 64
65. Identifying the Recurrent Laryngeal Nerve at Cricothyroid Joint 65
66. Recurrent Laryngeal Nerve in Tracheoesophageal Groove Behind Inferior Thyroid Artery 66
67. Left recurrent Laryngeal Nerve 67
68. Watch the Emissary at Cricothyroid Joint 68
69. Recurrent Laryngeal Nerve Passing Through the Branches of Inferior Thyroid Artery 69
70. Usual Variations of Recurrent Laryngeal Nerve and Inferior Thyroid Artery 70
71. The Cornerstone of Surgery 71
72. Divisions of Recurrent Laryngeal Nerve 72
73. Low Division of Recurrent Laryngeal Nerve 73
74. Divisions of Recurrent Laryngeal Nerve 74
75. Division of Recurrent Laryngeal Nerve 75
76. Misadventure at Cricothyroid Joint 76
77. Constant Guides to Recurrent Laryngeal Nerve 77
78. Nodule of Zuckerkandl 78
79. Nodule of Zuckerkandl 79
80. A Less Emphasized: Cricothyroid Joint 80
81. The Rule of the Parallel Line 81

82. Magnification Helps Here 82
83. Let the Sleeping Dog Lie—Ligament of Berry 83
84. Ligament of Berry—Posterior Condensation of Deep Fascia 84
85. Where the Nerve Enters—Emissary Vessels 85
86. Rare Variation—Non-recurrent Laryngeal Nerve 86
87. Setting the Bench Mark 87
88. Respecting the Neighbors—Parathyroids 88
89. Identification of Superior Parathyroids 89
90. Vascular Loop of Parathyroid (Superior Thyroid Artery) 90
91. Vascular Loop of Parathyroid (Inferior Thyroid Artery) 91
92. Vascular Loop (Inferior Thyroid Artery) 92
93. Vascular Loop (Inferior Thyroid Artery) 93
94. Unclear Yet Desirable Dissection 94
95. The Fascia Protects the Microvasculature 95
96. Medial to Lateral Dissection 96
97. The New Commandment 97
98. Inferior Thyroid Artery—New Commandments 98
99. Branch of Inferior Thyroid Artery Supplying Superior Parathyroid Gland 99
100. Time Well Spent 100
101. Inferior Parathyroids 101
102. Preserved Till the Last for a Reason—Inferior Thyroid Veins 102
103. Inferior Thyroid Veins 103
104. Thyroidea Ima Artery 104
105. Thyroidea Ima Artery 105
106. To Draw the Last Straw—Division of Isthmus 106
107. Isthmus is Removed Along with the Lobe 107
108. Cervical Sympathetic Chain 108
109. Thoracic Duct 109
110. A Job Well Done 110

111. Total Thyroidectomy with Left Radical Neck Dissection—Five Years Postoperative Picture 111
112. Back to the Clinics 112
113. Thyroglossal Cyst/Aberrant Thyroid 113
114. Puberty Goiter 114
115. Hashimoto's Thyroiditis 115
116. Inflammatory Diseases of Thyroid 116
117. Inflammatory Diseases of Thyroid 117
118. Metabolic—Autonomic Nodule (Toxic) 118
119. Surgery for Thyrotoxicosis 119
120. Graves' Disease (Uncontrolled) 120
121. Suspicious Nodules 121
122. Not so Happy Solitary Thyroid Nodule 122
123. Clinical Application of Various Risk Stratification Schemes 123
124. The Jigsaw of High and Low-risk 124
125. Low-risk Patients 125
126. Intermediate-risk Patients 126
127. High-risk Patients 127
128. Low-risk Patient with Low-risk Tumor 128
129. Low-risk Patient with High-risk Tumor 129
130. Unilateral Multinodular Goiter in Low-risk Patient 130
131. Bilateral Multinodular Goiter in Low-risk Patients 131
132. Large Bilateral Multinodular Goiter in Low-risk Patients 132
133. Multinodular Goiter in High-risk Patient 133
134. Compressive 134
135. High-risk Tumor with High-risk Patient 135
136. High-risk Patient with High-risk Tumor 136
137. Follicular Carcinoma of Thyroid 137
138. The Treatment Options in Medullary Thyroid Carcinoma 138

139. Well-differentiated Thyroid Carcinoma in Children 139
140. Well-differentiated Thyroid Carcinoma in Pregnancy 140
141. Anaplastic Cancers 141
142. A Case that Taught us to Respect Parathyroids 142
143. Technique of Parathyroid Implantation 143
144. This at Best Should be Avoided 144
145. A Common Sad Story 145
146. Branding is a Common Tribal Treatment with Little Benefit 146
147. Cervical Epidural Anesthesia 147
148. Optimal Anesthesia for Thyroid Surgery (Melghat, India) 148
Abbreviations *149*