INTRODUCTION
The thyroid gland occasionally fails to descend during development, and surgery becomes necessary when obstruction occurs. A new technique is described which facilitates removal of the gland with minimal invasiveness and optimal hemostasis.

METHODS AND MATERIALS
The procedure is performed in approximately one hour, requires no lip or tongue split, is associated with minimal to no blood loss, and is accomplished on an outpatient basis. Liberal video documentation (preoperative, intraoperative and postoperative) is provided to demonstrate this new technique.

RESULTS
The procedure was undertaken in a 30 year old woman with a longstanding lingual thyroid that began to cause dysphagia. She was found to be clinically and biochemically euthyroid and was referred for surgery.

CONCLUSIONS
A number of surgical approaches to the lingual thyroid have been described, including the use of a lip split, tongue split, mandibulotomy, cervical approach and lip degloving. We describe a minimally invasive procedure that incorporates harmonic technology and high resolution endoscopy and is accomplished with no external incisions on an outpatient basis.