



EAR, NOSE & THROAT CENTER OF THE OZARKS

Post Operative Instructions for Tonsillectomy and Adenoidectomy

Introduction

This information provides instruction on how to prepare you or your child for tonsillectomy and adenoidectomy surgery and how to care for yourself or your child following surgery. It includes symptoms to monitor, restrictions, and guidelines for diet and activity. The following information will help you or your child make a more comfortable and rapid recovery.

What information is needed before surgery?

Prior to surgery, you need to make your surgeon aware of the following information about you, your child, or any other family members:

- A history of bleeding problems
- Bruises easily
- A history of complications with anesthesia
- Symptoms of upper respiratory infection (cold, runny nose, flu, croup or fever) within one week of surgery
- Exposure to chicken pox or other illnesses within the previous two weeks or any current illnesses that the patient may have
- Medications currently being taken by the patient, both prescription and over-the-counter
- Any allergies or existing medical problems that the patient has

What about taking medications prior to surgery?

For two weeks prior to surgery, and two weeks following surgery, it is important that the patient take no medications that contain aspirin, ibuprofen or naproxen. These medications interfere with blood clotting and may increase the risk of bleeding during or after surgery. Aspirin is in a number of over the counter medications, for example, Anacin, Peptobismol, and Alka Selzer Cold. Ibuprofen is in such medications such as Advil, Motrin, and Pediaprofen. Naproxen sodium is found in Aleve.

Please consult your pharmacist about the content of medications or refer to the information provided with these and other medications.

For pain or fever, the patient should take acetaminophen (Tylenol) or the pain medication

prescribed by your doctor, but not both. Acetaminophen does not increase the risk of bleeding

What are the risks of surgery?

The risks of tonsillectomy and adenoid surgery include, but are not limited to, problems related to:

- Bleeding
- Breathing
- Swallowing
- Anesthesia
- Dehydration
- Infection
- Voice changes

Discuss the risks, benefits, and alternatives to surgery with your doctor. Make sure that all of your questions are answered before surgery.

What can be expected after surgery?

Generally it takes 7 to 10 days to recover after tonsillectomy and/or adenoidectomy. However, some patients may feel better in just a few days; others may take up to 14 days to recover.

Restrictions

Most patients rest at home for 7 days after surgery. As a rule, the patient can return to school or work when he or she is eating and drinking normally, off pain medications, and sleeping through the night. Even though the patient may be feeling well, the risk of bleeding may continue to be longer than 14 days. During this time, the patient should avoid vigorous activity, straining, or heavy lifting. In addition, gargling, throat clearing, and vigorous nose blowing should be avoided or minimized. For 24 hours following anesthesia or taking prescription pain medication, one should avoid:

- Rough physical play
- Using motorized or dangerous vehicles, toys, or equipment
- Riding a bicycle
- Drinking alcoholic beverages

- Making important decisions or signing legal documents

Managing Symptoms

Nausea and vomiting

Some patients may experience nausea and/or vomiting from the general anesthetic during the first 24-36 hours following surgery. If promethazine (Phenergan) suppositories have been prescribed, use as directed every 6 hours. Contact your surgeon or other health-care professional as directed if nausea or vomiting is experienced for more than 6-12 hours after promethazine is taken.

Fever

Patients may run a low-grade fever (99-101 degrees Fahrenheit) for several days following surgery. Your doctor will recommend treatment with Tylenol. If the fever rises to 102 degrees or higher, contact your surgeon or other health-care professional as directed.

Pain

Most patients experience throat pain following tonsillectomy and/or adenoid surgery. Pain may affect how patients eat, drink, or sleep. Because the same nerve that goes to the throat goes to the ears, patients may also have an earache. The degree of pain may vary during recover from mild to severe and may last up to 14 days following surgery.

Giving pain medication around-the-clock is the most effective way to control pain. Your doctor will prescribe pain medication that should be administered every 4-6 hours for the first few days after surgery.

The patient's age and medical history will determine if acetaminophen with codeine or other narcotics may be safely used. The side effects of codeine and many similar narcotics are sedation, nausea, vomiting, constipation, and stomach pain. Your doctor will recommend a dosing schedule that minimizes side effects. Because it is so important, again we mention that for two weeks following surgery, the patient should take no medications that contain aspirin, ibuprofen or naproxen.

Dehydration can worsen throat pain, so staying well hydrated will improve pain control. Other steps that can be taken to improve pain control include a humidifier in the patient's bedroom or an ice collar loosely applied to the neck for short periods of time. Chewing gum may help both throat and ear pain.

If you experience any complications from your pain medications, or any other medications that are prescribed by your surgeon, please contact your surgeon or other health-care professional as directed.

Breathing

Swelling in the throat may cause mouth breathing or snoring. Improvement in breathing is generally seen in 10-14 days after surgery. In the unlikely event that breathing

becomes very difficult, or the patient becomes unresponsive, stops breathing or turns blue, call 911.

If the patient is breathing too fast or too slowly but is awake and alert, contact your surgeon or other health-care professional as directed.

Scabs

Scabs form over the sites where the tonsils were removed. The scabs, which can appear as two distinct scabs or look like a single scab that covers the back of the throat, are thick and white and commonly cause bad breath. Within 5 to 10 days following surgery, the scabs fall off and are swallowed.

Bleeding

Discuss the risks and management of bleeding with your doctor. If patient experiences any bleeding from the nose or mouth, the patient should immediately be brought to the closest hospital emergency room. Again, any bleeding requires immediate attention.

Drinking

It is very important that patients drink plenty of fluid after tonsillectomy. Encourage juice, non-caffeinated soft drinks, Popsicles, and gelatin. Avoid straws for 2 weeks to avoid scratching the back of the throat, which may cause more pain or bleeding.

If the patient is showing signs of dehydration (has only 2 or 3 urinations per day or is crying without tears), contact your surgeon or other health-care professional as directed. The patient may need to return to the medical facility for evaluation and fluids.

Small amounts of liquid may come out through the nose while drinking. This should stop within a few weeks after surgery. If this persists, contact your doctor.

Eating

In general, for 2 weeks following surgery, the diet should be made up of liquids or soft foods, for example soft noodles, soups, ice cream, yogurt, puddings, mashed potatoes, eggs, cooked cereals, or very soft fruits or vegetables. Avoid sharp, hard or rough foods, such as raw fruits or vegetables. Also, avoid highly seasoned foods, hot liquids, or citrus foods or drinks

A patient may eat less for approximately one week after tonsillectomy or adenoidectomy. This may result in a temporary weight loss, which is gained back after a normal diet is resumed.

Do not be discouraged if one is not eating for a few days after a tonsillectomy as long as he or she is drinking well and keeping fluids down.

Voice

The patient's voice may be different after surgery, especially, if the tonsils and/or adenoid were significantly enlarged. If there is a voice change that persists for more than 3 months, notify your doctor.

Follow up care

Your doctor and his staff will arrange follow-up care. If you have any questions or concerns before that time, contact your surgeon or other health-care professional as directed by him.

Contacts

Our phone number is:
479-750-2080.

In case of an emergency or after 5p.m., weekends or holidays, contact the on-call ENT surgeon at:
479-751-5711.

Medications
