

Head and Neck Surgery – Ear, Nose, Throat & Allergy Specialists

Head and Neck Surgery Associates The Center for Surgical Care

Post-operative Instructions for Intranasal (Septoplasty, turbinectomy)/ Functional Sinus Surgery

The following instructions are based on experience with thousands of nasal operations. They are designed to answer practically every question that may arise regarding the “do’s” and “don’ts” after surgery. You and your family should read the instructions several times to familiarize yourselves thoroughly with them. Attempt to follow them faithfully because those who do so generally have the smoothest post-operative course. This, of course, favors proper healing and a better result.

Swelling: Every operation, no matter how minor, is accompanied by swelling of the surrounding tissues. The amount of swelling varies from person to person. It is usually greater when both the inside (septum) and outside of the nose have been operated on than when surgery is done on the inside (septum) only.

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The internal swelling will gradually increase, reaching its peak on the third day. This is not an indication that something is going wrong with your operation. Minor swelling may persist for 1-2 weeks. The main thing to remember is such swelling eventually subsides.

You can help the swelling subside in several ways:

- ❖ Avoid bending over or heavy lifting for one week. Besides aggravating swelling, this may raise the blood pressure and start bleeding.
- ❖ Avoid hitting or bumping your nose for at least one week following surgery. It is not wise to pick up small children who may inadvertently bump your nose.
- ❖ Sleep with the head of the bed elevated for five (5) days. To accomplish this, place two (2) or three (3) pillows under the head of the mattress and one (1) or two (2) on top of it. Try not to roll over on your nose.
- ❖ You may gently blow your nose the fourth day after the operation. Do not push on the nose when blowing. Blow gently through both sides at the same time.
- ❖ Avoid constantly rubbing the nostrils and base of the nose with Kleenex or a handkerchief. Not only will this aggravate the swelling, but it could cause infection, bleeding, or the accumulation of excessive scar tissue inside the nose. Use a moustache dressing if the discharge is excessive.
- ❖ Report any excessive bleeding that persists after using a nasal spray (Afrin or Neo-Syneprine) and sitting up for 15 minutes.

Hemorrhage: You can expect more mucous drainage for several days after surgery. It will be blood-tinged and should cause you no concern unless the drainage becomes frankly bloody and flows profusely as when one cuts a finger.

If hemorrhage does occur, use a nasal spray such as Afrin or Neo-Syneprine, and elevate the head. Then apply ice compresses to the neck and report the bleeding to us. Further instructions will be given for care.

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Pain: There is usually only mild to moderate pain following nasal and sinus surgery.

If significant in nature, you may take one (1) of the pain relievers prescribed for you. Tylenol can be used for minor discomfort.

During the healing process, you may experience occasional sinus headaches. These may occur up to several weeks after surgery. They will gradually disappear as the healing process continues.

Nasal Blockage and Nose Sprays: Nasal blockage is to be expected after nasal surgery and will gradually subside over a period of 7-10 days.

Nose sprays such as Afrin or Neo-Synephrine may be used for 5-7 days if recommended by your physician.

Cleaning the Nose: Don't blow the nose at all for three (3) days, you may gently sniff however: after that, blow through both sides at once – do not compress one side. You may clean the outside of the nose and the upper lip with cotton-tipped applicators (Q-tips) moistened with hydrogen peroxide as soon as you return home, but don't rub too vigorously. Dried blood in the nostrils may be gently cleaned and removed with a Q-tip.

Vaseline or an antibiotic ointment may be applied to the inside of the nostrils

Resume Activities: You may resume physical activity in two (2) weeks.

Try to avoid sneezing. If you must; let it come out like a cough – through the mouth. If becomes a real problem, we will prescribe medicine to alleviate the condition.

Glasses may be worn as normal. Contact lenses may be inserted the day after surgery.

Dryness of the Lips: If the lips become dry from breathing through the mouth, coat them with Vaseline or Lipstick.

Temperature: Generally, the body temperature does not raise much above 100° following surgery, and this rise is due to the fact that the patient becomes mildly dehydrated because he/she does not drink enough fluids. Patients will often think they have fever because they feel warm, but, in reality do not.

To be sure you should measure your temperature. Report any persistent temperature above 101° however.

Medications: Following surgery, you should take the medications your physician prescribed. You should resume any medications you were taking for medical reasons prior to surgery. Do not

take aspirin or aspirin products, ibuprofen, or "arthritis" medications for two (2) weeks after surgery.

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Weakness: It is not unusual after a person has an anesthetic or any type of operation to feel weak, have a rapid pulse, break out in "cold sweats" or to feel light headed. This gradually clears up in a few days without medication.

Bathing and Hair Care: Tub bathing or showering can be resumed as soon as the patient feels strong enough to do so. It is probably best to have assistance standing by on the first couple of occasions.

Your First Post-operative Visit: If your operation was performed in our Surgery Center, this appointment will be scheduled before leaving the Surgery Center. If your surgery was at the hospital, please call the office for your first post-operative visit (usually in one week or less).

Returning to School or Work: The average patient is able to return to school or work within seven (7) days following surgery. Some individuals may return to desk jobs in three (3) to four (4) days. This will be determined by your physician.

Injury to the Nose: Many individuals sustain accident hits on the nose during the early post-operative period. One need not be too concerned unless the blow is hard or if hemorrhage or considerable swelling ensues. Report the incident by telephone.

Finally: Please follow these instructions faithfully so that you can attain the desired result.

If you have any further questions or concerns, please do not hesitate to call our office.