

ENT SURGICAL CONSULTANTS

Thomas K. Kron, MD, FACS
Michael G. Gartlan, MD, FAAP, FACS
Rajeev H. Mehta, MD, FACS
Scott W. DiVenere, MD
Sung J. Chung, MD
Ankit M. Patel, MD

2201 Glenwood Ave., Joliet, IL 60435
(815) 725-1191, (815) 725-1248 fax

1300 Copperfield Ave., Suite 3060, Joliet, IL 60432
(815) 727-6031

119 E. Jefferson St., Morris, IL 60450
(815) 941-1972

15300 West Ave., Suite 305 (East Bldg), Orlando Park, IL 60462
(708) 349-5500

NASAL & SINUS SURGERY (12/05)

Nasal Drainage

Immediately after surgery, you will have drainage from your nose. At first, there may be a small amount of bright red bleeding, but do not be alarmed. A small amount is normal and may continue through the first week. A gauze dressing will be placed on your upper lip to absorb this drainage. It may be necessary to change this dressing several times on the day of your surgery. Any bright red bleeding that lasts more than ten minutes, or is heavy, spray two puffs of *Afrin* or *Neosynephrine* (or generic equivalent) decongestant nasal spray in each nostril every ten minutes until the bleeding subsides. This medication is available over-the-counter. Relax with your head elevated, tilt your head forward and gently pinch your nostrils with an ice pack over the bridge of your nose. Persistent bleeding should be reported to your doctor immediately. Old blood, which accumulated during surgery, is dark reddish-brown and will drain for a week or more. It may continue for several weeks. The drainage at times may be thicker and yellow-green in color.

Nasal Congestion

For the first week after surgery, your head will feel stuffy. This is because you will have swelling of the mucous membranes of your nose. This is normal and expected. The stuffiness will gradually decrease over the next few weeks, so please be patient. After this, an improvement in your nasal breathing should be noticed. Nasal packing may or may not be left in place after surgery. If you had surgery on your nasal septum, your doctor may have placed plastic supporting splints in your nose. If you do have packing or splints, your doctor will remove them in the office within a week of surgery.

Discomfort after Surgery

There is some discomfort after surgery. Rather than actual pain, it is more of an ache or pressure. This pressure may increase somewhat during the first week. That is due to increased swelling and the accumulation of sinus secretions. After nose and sinus surgery there are raw areas within the nose cavity, which need time to heal. If a pain medication is prescribed, take as ordered. If none was ordered, take acetaminophen (*Tylenol*) according to package directions. Do *not* use anti-inflammatory medication (aspirin, ibuprofen, naproxen, *Aleve*, *Advil*, *Motrin*, *Lodine*, *Mobic*, etc) for either two weeks before or three weeks after surgery. These products may prolong bleeding. *Celebrex*, *Bextra*, and *Vioxx* are not a problem. For additional pain relief, place ice packs over your cheeks every three or four hours for 15 to 20 minutes. It may take five to six weeks for full recovery. Please be patient during this time.

Fever, Nausea and Vomiting

It is normal to run 1-2° F above your normal temperature after surgery. A high or prolonged fever may indicate infection. Persistent high fever should be reported to your doctor. You may vomit a few times after surgery. This is not unusual and may last up to 36 hours after surgery. It is usually the result of the anesthesia medications or blood, which was swallowed during the procedure.

Nasal Sprays

At the same time you pick up your prescribed medication at your pharmacy, please purchase *Afrin* or *Neosynephrine* decongestant nasal spray, in addition to a nasal saline spray. Both of these nasal sprays may be purchased over the counter without a prescription. Generic substitutes are acceptable. *Afrin* or *Neosynephrine* decongestant nasal spray is helpful to keep on hand in case bleeding is a problem (see **Nasal Drainage** section). This should only be used for active bleeding. The nasal saline spray is used to prevent crusting and bleeding after surgery. Please use it liberally to enhance the healing process. It should be used repeatedly until the nose is completely healed. This spray contains no medication. If you were using a nasal steroid spray (*Flonase*, *Nasacort*, *Nasonex*, or *Rhinocort*) before surgery, you should restart this medication after your first postoperative office appointment. It is best to clear your nasal secretions with the saline irrigation before each use.

Other Medication

Your doctor will usually prescribe pain medication such *Tylenol with Codeine* or *Vicodin*. This medication may cause constipation or nausea. Occasionally, stool softeners are necessary. Give medication with food and not on an empty stomach. Your doctor may also prescribe an antibiotic in order to decrease the amount of inflammation after surgery. This should be taken as directed. If a rash or diarrhea develop, you should discontinue the antibiotic and notify your doctor. *Benadryl* will often help the rash. Unless directed by your doctor, do not use antihistamine or decongestant medications.

Nasal Irrigations

As soon as the active bleeding has subsided a few days after surgery, it is important to start full high volume nasal irrigations to help flush away the clots and help clean the nasal cavity. This is different than just spraying the nose with the above nasal saline sprays. It is best to use a nasal saline wash kit such as *Sinus Rinse*. This may be purchased through our office or online at www.nasalrinse.com. Alternatively, it can be prepared by adding 1 to 1.5 heaping teaspoons of "pickling/canning" salt to a clean one-quart glass jar filled with water. Then add one rounded teaspoon of baking soda (pure bicarbonate) and shake before each use. Plan to rinse the nose with it at least two to three times each day. You will need a bulb/ear syringe. Stand over the sink or in the shower and squirt the mixture into each side of your nose. Aim the stream toward the back of your head (*not* the top of your head), while saying "ahhhh". This prevents the salt water from going down your throat.

Diet

Immediately after surgery, frequent sips of cool liquids (water, juices, and non-carbonated beverages) are encouraged. It is important to drink plenty of liquids to keep from getting dehydrated. You may resume your regular diet the day following surgery if you are not nauseated. Drinking alcoholic beverages is discouraged.

Activity

You should stay home and rest the day you are released from the hospital and be allowed adequate opportunity to rest for the next several days. You can help any swelling to subside by resting in bed with two or three pillows under your head. Spend the first three days following surgery relaxing quietly out of bed, gradually increasing your activity as tolerated. Bending, straining, lifting, or other strenuous activity should be avoided for at least two to three weeks after surgery. You should not drive or operate any machinery until your doctor has checked you, particularly if you are still taking narcotic pain medication. Nose blowing, harsh coughing, clearing of the throat, and sneezing should be avoided for three weeks after surgery. Gently sniffing through the back of your nose and spitting it into a tissue can clear excessive secretions. If sneezing cannot be avoided, try to sneeze with your mouth open. Avoid nasal irritants such as smoke or dust. A humidifier is helpful while your nose is plugged or swollen.

Special Instructions for External Nasal Surgery Only

Apply an ice mask or a cool washcloth over your eyes and forehead for the first 24 to 36 hours after surgery, but no pressure should be put on the nose itself. It is best to avoid wearing glasses, talking, and smiling excessively after surgery. Contact lenses may only be worn after eye swelling has diminished, usually in one to two weeks. Avoid direct sunlight to your face for two months after surgery. If you are in the sun, wear a wide brimmed hat and use a sunscreen with a 30 SPF rating. Brush your teeth gently with a soft toothbrush or toothpaste on a finger. Men may shave as usual. If the lip is swollen, do not shave it for a few days. Splints, tape, and dressings are often used for surgery on the outside of the nose as well. Do not disturb these unless instructed to do so by your physician. These are usually removed during the first office visit after surgery. Gentle cleansing of dried blood or soiled areas around your upper lip and nostrils is best accomplished with hydrogen peroxide and a cotton swab.

Postoperative Visits

It is very important to keep all appointments after surgery. As a general rule, you can expect repeated visits during the first one or two months after surgery, most frequently for sinus surgery. On the first postoperative visit, internal nasal splints and packing are usually removed if present. At these visits, your doctor will clean and examine the operative area. This cleaning prevents scarring. Please take your prescribed pain medication prior to your postoperative visits to make the cleaning procedure more comfortable. Do not be alarmed since we always use topical (sprayed) anesthetic before cleaning. This procedure is usually performed several times until full healing occurs. The frequency of these visits varies depending on the type of surgery and on your rate of healing. The more aggressive you are at following the instructions for the high-volume nasal saline irrigations, the better the outcome. This will also lessen the need for postoperative cleaning.

Questions

Please confine any questions that are not an emergency to regular office hours. We are always available for emergency problems, but non-emergency calls during nights and weekends can be exhausting and keep us from being at our best during regular working hours. Thank you for your understanding.

Call Your Doctor Immediately if You Have Any of the Following:

- Any vision problem (loss of vision, double vision, black eye, or bulging of one or both eyes).
- Neck stiffness (unable to touch your chin to your chest) in addition to fever, laziness, marked headache.
- Fever over 101.5° F.
- Excessive bleeding not controlled by the *Afrin* or *Neosynephrine* decongestant nasal spray.

Follow-up Appointment

You will need to be rechecked by the doctor one to three weeks after surgery. Make all postoperative appointments through our main office (815-725-1191) between 9 AM and 4 PM Monday through Friday.