

ENT SURGICAL CONSULTANTS

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

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

1890 Silver Cross Blvd, Pavilion A, Suite 435, New Lenox, IL 60451
815-717-8768

900 W. Rte 6, Suite 960., Morris, IL 60450
(815) 941-1972

www.entsurgicalillinois.com

NASAL & SINUS SURGERY (7/13)

Nasal Drainage and Bleeding

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 over-the-counter **Afrin decongestant nasal spray** (or generic equivalent) in each nostril every ten minutes until the bleeding subsides. This should only be used for active bleeding. This medication is available. 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.

As soon as the active bleeding has subsided a few days after surgery, it is very important to start full high volume nasal irrigations to help flush away the clots and help clean the nasal cavity. This is much more than just spraying the nose with nasal saline sprays. We recommend using the nasal saline wash kit **Sinus Rinse at least 4 times a day**. 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.

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, and 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 and may peak 5 days after the procedure. 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 after surgery. These products may prolong bleeding. *Celebrex* is 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 over **101.5° F** 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 from 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 over the counter **Afrin decongestant nasal spray** to keep on hand in case bleeding is a problem and a **nasal saline spray** to keep the nasal cavity moist for several weeks after surgery. 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** (fluticasone, *Flonase*, *Nasacort AQ*, *Nasonex*, or *Rhinocort*, *Nasarel*, *Veramyst*, *QNASL*, *Zetonna*) before surgery, you should restart this medication within 1 week of surgery even before 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 *acetaminophen with hydrocodone*. This medication will certainly cause constipation and may even cause nausea. Over-the-counter stool softeners (such as *Miralax* or *Colace*) are necessary when using a narcotic

medication. 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.

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 from mouth breathing. 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 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 two 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.

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. Do not be alarmed since we always use topical (sprayed) anesthetic before cleaning. This cleaning prevents scarring. Please take your prescribed pain medication prior to your postoperative visits to make the cleaning procedure more comfortable. 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 Sinus Rinse nasal saline irrigations, the better the outcome and the less cleaning needed.

Special Instructions Only for External Nasal Surgery (Rhinoplasty, External Nasal Reconstruction, Nasal Fracture Repair)

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.

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* 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.