

FOLLOW THESE POST-OP GUIDELINES AFTER NASAL/SINUS SURGERY

Before the surgery

Nothing to eat or drink after midnight the night before. You should not take **medications that affect the blood's ability to clot for one week before and two weeks after surgery.** Some of these medications include aspirin or any aspirin-containing product, ibuprofen, Advil, Aleve® or any ibuprofen-containing product, and all nonsteroidal anti-inflammatory drugs commonly used to treat muscle and joint problems (e.g., Naprosyn). Coumadin and Heparin are two common blood thinners that you should avoid taking prior to surgery. Consumption of alcohol, vitamin E, fish oil or large amounts of garlic is also not advisable during the above time period due to their anticlotting properties. If you were taking medications prior to the surgery, contact the physician who placed you on these medications to determine when and if to resume the medications.

Activity

No nose blowing for seven days. After seven days, gentle nose blowing is permissible. If sneezing should occur, do so through an open mouth to prevent the full force of the sneeze from going through the nose. No strenuous activity for a minimum of seven days. Strenuous activity includes lifting anything greater than 15 lbs. and all vigorous activities, especially contact sports. After seven days, you can increase your activity gradually and reasonably. Keep your head up on pillows or sit in a chair to help decrease postoperative swelling, skin discoloration and discomfort.

Diet

Maintenance of adequate fluid intake and nutrition is essential for proper wound healing and speedy recovery from your surgery. The average-sized adult requires at least two liters of fluid intake daily, and greater amounts are preferable.

Medications

If your doctor prescribes postoperative medication, **take the medication until it is all gone, even if you are feeling fine.** This medication could include but is not limited to pain medication, antibiotics and steroids. If you experience any issues with the prescribed medications, please contact your physician.

Pain Management

You can expect pain or discomfort after nasal or sinus surgery. People experience and tolerate pain in different ways. For some, it can be significant, while for others, it may be minimal. Your doctor will prescribe pain medication to you. For mild discomfort, you can take regular Tylenol®. If your pain is intolerable while taking the prescribed medicine as directed, please call your ENT physician.

Operative Site Care and Expectations

If drainage occurs, it is helpful to wear a small gauze dressing taped under the nose for the first several days after surgery to absorb the drainage. You can expect nasal congestion after any kind of nasal or sinus surgery. The congestion improves after the doctor removes the splints. The congestion may not completely resolve for several weeks due to postsurgical swelling of tissue within the nose and nasal crusting. Nasal crusting is common after any kind of nasal or sinus surgery. You can improve nasal crusting with the use of saline nasal spray, humidification and nasal irrigation. **Sitting or sleeping upright at a 45-degree angle in a chair or propping your head up with a pillow could help ease nasal congestion.**

****NASAL IRRIGATIONS ARE A VERY IMPORTANT PART OF YOUR POSTOPERATIVE RECOVERY PERIOD. PLEASE FOLLOW THE ATTACHED INSTRUCTIONS FOR NASAL IRRIGATIONS. A NEILMED® SALINE RINSE KIT OFTEN WORKS THE BEST.****

Numbness

Patients who have had septoplasty or nasal bone surgery often experience numbness of the nasal tip, nasal roof and upper front teeth. Skin and tooth numbness usually resolves with time.

Internal Splint

Patients undergoing septoplasty or nasal bone surgery will usually have a soft plastic splint placed along each side of the nasal septum to aid with healing. A single suture holds the splint in place. Your doctor will easily remove the splint and suture with minimal discomfort to you at your first postoperative office visit.

Fever

Low-grade fever (less than 101.5 F) after nasal or sinus surgery is common, especially if the surgery was done under a general anesthetic. You can reduce the fever with Tylenol.

Fatigue

Fatigue is common after any surgical intervention. Adequate rest is essential. In most cases, postsurgical fatigue resolves in seven to ten days.

Causes for Concern

Persistent bloody oozing from the nose lasting longer than five to seven days or recurrent severe nosebleeds can be signs of a blood-clotting problem. When bleeding occurs down the front of your nose or into the back of your throat, you should tilt your head forward while sitting up and gently pinch your nose. Bleeding could persist for 30 minutes or longer. Notify your ENT physician if this occurs. A fever of 101.5° F or greater can be a signal that an infection is starting or has begun. Notify your ENT physician if this occurs. As mentioned, bloody or blood-tinged drainage from the operative site is common after nasal or sinus surgery. Yellow, foul-smelling drainage from the operative site may be a sign of infection. Notify your ENT physician if this occurs.

Follow-up

By this time, you should have your first and second postoperative appointments scheduled. The first post-op visit is usually seven days after surgery. At your first postoperative appointment, your ENT physician will remove the splints, and any mucus or blood will be suctioned. If a postoperative visit was not scheduled before your surgery, please call our office ASAP to schedule one. Post-op care helps prevent persistent or recurrent sinus disease.

****IF UNDERGOING RHINOPLASTY****

Bruising and Swelling

If you have had nasal bone surgery, bruising and swelling of the eyelids, forehead and skin surrounding the nose usually occurs. In some individuals, bruising and swelling may be quite considerable. Swelling decreases in two to three days, and the bruising is usually gone in seven to ten days. In some individuals, especially those with dark complexions, a dark hue may develop under the skin of the lower eyelids that can persist for up to six months. Nasal bone surgery patients should place ice on the forehead and eyes, being careful not to press on the nose itself.

Internal and External Splint

Patients undergoing septoplasty or nasal bone surgery will usually have a soft plastic splint placed along each side of the nasal septum to aid with healing. A single suture holds the splint in place. Your ENT physician will easily remove the splint and suture with minimal discomfort to you at the first postoperative office visit. Patients who have had nasal bone surgery will also have an external splint applied at the time of surgery to aid in keeping the nasal bones in the proper position. Your ENT physician will easily remove this splint with minimal discomfort to you at the first postoperative office visit. Please try to avoid getting the external splint wet.

Incisions

In most nasal and sinus surgery cases, the ENT physician makes the incisions internally within the nose. The doctor closes the incisions with self-absorbing sutures that do not require removal. In some types of nasal and sinus surgery, the ENT physician makes small external incisions on the nose and face. Your doctor will remove the sutures used to close these incisions within five to seven days of surgery. Please keep these external incisions clean by applying hydrogen peroxide-wetted Q-tips to the area followed by antibiotic ointment twice a day until the sutures are removed. You can purchase antibiotic ointment over the counter at your pharmacy. You should wash your hands thoroughly before caring for the incision(s).