

Post Op Guidelines To Be Followed After Nasal/Sinus Surgery

Activity

1. No nose blowing for seven days. After this time, 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.
2. No strenuous activity for a minimum of seven days. This includes lifting anything greater than 15 lbs. and all vigorous activities, especially contact sports. After this time, activity may be increased gradually and reasonably.
3. Keeping the head up on pillows or sitting in a chair helps decrease postoperative swelling, skin discoloration and discomfort.

Diet

1. A liquid diet is advisable for the first several hours for all individuals who have had a general anesthetic. A regular diet may be resumed after the immediate post operative nausea has subsided.
2. 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 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 medication.

1. Medications that affect the ability of the blood to clot should not be taken for two weeks before and three weeks after surgery. Some of these medications include: Aspirin or any aspirin containing product, ibuprofen or any ibuprofen containing product (e.g., Advil), all nonsteroidal antiinflammatory drugs commonly used to treat muscle and joint problems (e.g., Naprosyn), Coumadin, Heparin and Persantine (Dipyridamole). Consumption of alcohol, vitamin E or large amounts of garlic is also not advisable during the above time period due to their anticlotting properties.
2. In some cases, a post operative antibiotic may be prescribed. Take the medication until it is all gone even if you are feeling fine.

Pain Management

1. Pain or discomfort after nasal and/or sinus surgery is to be expected. People experience and tolerate pain in different ways; for some it can be significant while for others it may be minimal. The pain may manifest itself as a headache, eye discomfort, sinus pain or pressure, nasal or cheek soreness or any combination of the above.
2. Pain medication will be provided for you by prescription. For mild discomfort regular Tylenol may be taken. Pain medicine is not designed to completely relieve all pain or discomfort. If your pain is intolerable while taking the prescribed medicine as directed, then call your ENT physician. Use pain medication only when needed and for as long as needed.
3. Most pain medications contain narcotics, which have a tendency to slow down the intestinal tract and create a problem with constipation. You may use a laxative such as Milk of Magnesia or Metamucil if this occurs.

Operative Site Care and Expectations

1. **Nasal Packing** Every attempt is made to avoid the use of nasal packing with nasal and/or sinus surgery. Nasal packing is only used in surgery if bleeding does not stop within a reasonable time limit. Absorbable packing is used, which does not need to be removed. Occasionally, a sponge type of packing is placed in each side of the nose and is easily removed in 24 to 48 hours.
2. **Bloody drainage** will usually occur from the nose anywhere from two to three days and in some cases for as long as seven days following surgery. The drainage may include blood clots, mucus mixed with blood, thin watery fluid mixed with blood and sometimes bright red blood. A self absorbing packing material is sometimes used during nasal and sinus surgery to help control bleeding. It usually becomes dark brown or gray in color. Sometimes small portions of this material may protrude from the nose or down the throat; this is normal and to be expected.

It is helpful to wear a small gauze dressing taped under the nose for the first several days after surgery to absorb the drainage. Once the drainage stops there is no need to continue to wear the dressing. Gauze pads may be purchased over the counter at your pharmacy.

You may remove dried blood and mucus from in and around your nostrils with a warm washcloth. The application of Vaseline or antibiotic ointment to the nostril rim will help prevent chafing and soreness.

3. **Nasal Congestion** is to be expected after any kind of nasal and/or sinus surgery. Nasal congestion is maximal with sponge packing and moderate if only internal nasal splints are used. The congestion improves after packing and/or splint removal. The congestion may not completely resolve for several weeks due to postsurgical swelling of tissue within the nose and with nasal crusting.
4. **Nasal Crusting** is common after any kind of nasal and/or sinus surgery. The degree and duration of crusting depends on the type and extent of the surgery as well as other factors (e.g., humidity). Crusting decreases with time and usually resolves completely within one to three months of the surgery. Nasal crusting can be improved with the use of saline nasal spray, humidification and nasal irrigation.

Nasal irrigations are a very important part of your post operative recovery period. Please follow the attached instructions for nasal irrigations.

5. **Bruising and Swelling** If one has 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 10 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.

Exposing surgical scars or discolored skin (as described above) to the sun can result in dark pigmentation of the skin in these areas. This can be prevented by protecting the above areas with sun blocker lotion or shading with clothing or a hat.

Crushed ice in a Ziploc bag or other reasonable substitute applied to the affected area(s) for two to three days is very helpful in relieving postoperative pain and swelling. Nasal bone surgery patients should place the ice on the forehead and eyes, being careful not to press on the nose itself.

Keeping the head elevated above the heart as much as possible also helps reduce postoperative pain and swelling and assists in the resolution of existing swelling. This can be accomplished by propping the head up with pillows when lying down, standing and sitting in a chair.

6. **Numbness** Patients who have had septoplasty and/or nasal bone surgery often experience numbness of the nasal tip, nasal roof and upper front teeth. Skin numbness and tooth numbness usually resolve with time.
7. **Internal and External Splint** Patients undergoing septoplasty and/or nasal bone surgery will usually have a soft plastic splint placed along each side of the nasal septum to aid with healing. The splint is held in place with a single suture. The splint and suture are easily removed at the first postoperative office visit with minimal discomfort. 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 proper position. This splint is easily removed at the first postoperative office visit with minimal discomfort. Please try to avoid getting the external splint wet.

8. **Incisions** In most cases of nasal and sinus surgery, incisions are made internally within the nose. These incisions are closed with self absorbing sutures that do not require removal.

In some types of nasal and/or sinus surgery, small external incisions are made on the nose and/or face. Sutures used to close these incisions are removed 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. Antibiotic ointment may be purchased over the counter at your pharmacy. Hands should be thoroughly washed before caring for the incision(s).

9. **Fever** Low grade fever (less than 101.5 F) after nasal and/or sinus surgery is common, especially if the surgery was done under a general anesthetic. The fever is usually caused by mild lung congestion and resolves within 24 to 48 hours. Fever can be reduced with Tylenol. Fever can often be helped and prevented by short walks and deep breathing exercises.
10. **Fatigue** is common after any surgical intervention. Adequate rest is essential. In most cases postsurgical fatigue resolves in seven to 10 days.

Causes for Concern

1. Persistent bloody oozing from the nose lasting longer than five to seven days, or recurrent severe nosebleeds can be a sign of a blood clotting problem. Notify your ENT physician if this occurs.
2. A fever of 101.5 F or greater can be a signal that an infection is starting or has begun. High fevers are often accompanied by shaking and chills. Notify your ENT physician if this occurs.
3. Headache after nasal surgery usually occurs for the first one to two days and then begins to dissipate. Headache after post operative day three can be a sign of infection. Notify your ENT physician if this occurs.
4. As mentioned, bloody or bloodtinged drainage from the operative site is common after nasal and/or sinus surgery. Yellow foul smelling drainage from the operative site may be a sign of infection. Notify your ENT physician if this occurs.
5. Postoperative complications of sinus surgery involving the eyes can result in visual problems and/or excess tearing. Excess tearing normally occurs for one to two days, and then usually goes away. If tearing becomes persistent, notify your ENT physician at the first post operative visit.

More serious eye complications can present with eye bulging, limitation of eye movement, eye pain and actual visual disturbance. These eye complications are a cause for extreme concern, and your ENT physician should be notified immediately.

Follow-up

The date of the first postoperative visit will be determined by the ENT physician. The first visit is usually seven days after surgery. If a post operative visit was not scheduled prior to your surgery, please call our office ASAP to schedule one.

You should anticipate the need for frequent visits to our office until healing is nearly completed. This usually takes place weekly after the surgery, usually lasting four to six weeks. Post operative debridement of your nose is an important part of the surgery. Post op care helps prevent persistent or recurrent sinus disease. If you are still having pain the day of your post op visit you may take one prescribed pain pill or two Tylenol approximately one hour prior to your post op visits. Plan on having someone drive you to our office for the first sinus debridement. Although discomfort can be expected with the first visit, each successive debridement is much easier.

You can expect some bleeding from your nose for several days after the surgery and then again after each office debridement for the first several weeks. 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. Do not snort the blood in through your nose or blow your nose as this will cause more bleeding. If bleeding persists for 30 minutes or more, please notify our office.