



## Sinus Surgery Perioperative Instructions

### **Introduction**

This information provides instruction on how to prepare you for nasal surgery and how to care for yourself following surgery. It includes symptoms to monitor, restrictions, and guidelines for diet and activity. The following information will help you make a more comfortable and rapid recovery.

### **What information is needed before surgery?**

Prior to surgery, you need to make your surgeon aware of the following information about you or any other family members:

- A history of bleeding problems or bruising easily
- A history of complications with anesthesia
- Symptoms of upper respiratory infection (cold, runny nose, flu, croup or fever) within one week of surgery
- Exposure to chicken pox or other illnesses within the previous two weeks or any current illnesses
- Medications currently being taken by the patient, both prescription and over-the-counter
- Any allergies or existing medical problems

### **What are the risks of surgery?**

The risks of nasal surgery include, but are not limited to, problems related to:

- Bleeding
- Breathing
- Anesthesia
- Dehydration
- Infection
- Voice changes
- Injury to adjacent structures including the brain
- Visual Loss
- A need for additional procedures

Discuss the risks, benefits, and alternatives to surgery with your doctor. Make sure that all your questions are answered before surgery.

### **What can be expected after surgery?**

While it generally takes 7 to 10 days to recover after sinus surgery, some patients may feel better in just a few days; others may take up to 14 days or longer to recover.

### **Restrictions**

Most patients rest at home for 7 days after surgery. As a rule, the patient can return to school or work when he or she is eating and drinking normally, off pain medications, and sleeping through the night. Even though the patient may be feeling well, the risk of bleeding may continue to be longer than 14 days. During this time, the patient should avoid vigorous activity, straining, or heavy lifting. In addition, vigorous nose blowing should be avoided or minimized. For 6 weeks following surgery, the patient should avoid any activities that may risk contact to the nose. For 24 hours following anesthesia or taking prescription pain medication, one should avoid:

- Rough physical play
- Using motorized or dangerous vehicles, toys, or equipment
- Drinking alcoholic beverages
- Making important decisions or signing legal documents

## **Managing Symptoms**

*Nausea and vomiting* - Some patients may experience nausea and/or vomiting from the general anesthetic during the first 24-36 hours following surgery. If promethazine (Phenergan) suppositories or oral ondansetron (Zofran) have been prescribed, use them as directed every 6 hours. Contact your surgeon or other healthcare professional if nausea or vomiting is experienced for more than 6-12 hours after anti-nausea medication is taken.

*Fever* - Patients may run a low-grade fever (99-101 degrees Fahrenheit) for several days following surgery. Your surgeon will recommend treatment with Tylenol. If the fever rises to 102 degrees or higher, contact your surgeon or other healthcare professional.

*Pain* - Most patients experience some pain following nasal surgery. Pain may affect how patients eat, drink, or sleep. The degree of pain may vary during recover from mild to severe and may last up to 14 days following surgery.

Your surgeon will prescribe pain medication that should be administered every 4-6 hours for the first few days after surgery. The patient may transition to over-the-counter Tylenol whenever he or she is ready.

The patient's age and medical history will determine if acetaminophen with oxycodone or other narcotics may be safely used. The side effects of oxycodone and many similar narcotics are sedation, nausea, vomiting, constipation, and stomach pain. Your surgeon will recommend a dosing schedule that minimizes side effects.

Dehydration can worsen pain, so staying well hydrated will improve pain control. Other steps that can be taken to improve pain control include a humidifier in the patient's bedroom or an ice pack loosely applied to the nose for short periods of time. If you experience any complications from your pain medications, or any other medications that are prescribed by your surgeon, please contact your surgeon or other healthcare professional.

*Breathing* - Swelling in the nose may cause mouth breathing or snoring. Improvement in breathing is generally seen when any internal nasal splints are removed or in 7-14 days after surgery. The frequent use of nasal saline spray and the twice daily use of Afrin (for up to 5 days) will help decrease nasal stuffiness and crusting.

In the unlikely event that breathing becomes very difficult, or the patient becomes unresponsive, stops breathing or turns blue, call 911.

If the patient is breathing too fast or too slowly but is awake and alert, contact your surgeon or other healthcare professional.

*Bleeding* - Discuss the risks and management of bleeding with your surgeon. Patients will normally have some nasal bleeding and/or blood tinged nasal drainage following nasal surgery. The gauze mustache dressing may be changed as needed and may need to be changed up to 4-5 times the night following surgery. If the patient experiences any severe bleeding from the nose or mouth, he or she should lean their head forward and hold gentle pressure on the sides of the nasal tip. If this persists longer than a few minutes, he or she should immediately be brought to the closest hospital emergency room. Again, any severe persistent bleeding requires attention.

*Drinking* - It is very important that patients drink plenty of fluid after nasal surgery. Encourage juice, non-caffeinated soft drinks, Popsicles, and gelatin. If the patient is showing signs of dehydration (has only 2 or 3 urinations per day or is crying without tears), contact your surgeon or other healthcare professional. The patient may need to return to the medical facility for evaluation and fluids.

*Eating* - In general, a normal diet can be resumed immediately after the patient returns home following surgery if there is no nausea.

A patient may eat less for approximately one week after surgery. This may result in a temporary weight loss, which is gained back after a normal diet is resumed.

*Voice* - The patient's voice may be different after surgery. If there is a voice change that persists for more than 3 months, notify your surgeon.

*Showering* - Showering may be resumed immediately after the patient returns home following surgery.

## **Follow up care**

Your surgeon and his staff will arrange follow-up care. If you have any questions or concerns before that time, contact your surgeon or other healthcare professional.

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