

Post Operative Instructions for Nasal Surgery

Your Post Operative follow up appointment is scheduled 5-7 days after surgery:

(This will take place at our Lincoln Park Location: #103 - 49 Richard Way SW, Calgary, AB)

Pain Control

You will be given narcotic pain medication after surgery while in hospital. You will be prescribed pain medication as well to be taken at home after discharge. Take this medication as you need for pain management, and try not to let the pain increase to an intolerable point before taking the medication. If you use all the medication, please contact our office prior to running out to obtain another prescription. Acetaminophen (Tylenol®) is preferred for pain control as narcotics should be used cautiously outside of the hospital setting.

Avoid aspirin, NSAIDs (such as ibuprofen, Advil®, Motrin®, naproxen, or Aleve®), vitamin supplements, or herbal medications for at least two weeks because they can increase your risk of bleeding after surgery.

Your pain will be significant for at least the first 2-3 days post surgery, but this should improve considerably by 10 days following surgery.

Diet

The nasal pain and swelling from surgery, which is to be expected, does not tend to affect your swallowing function after surgery. However, you may experience some minor discomfort or irritation in your throat because of the endotracheal tube that was used for your general anesthetic. Nonetheless, your diet should be very much the same as it was before surgery with very little in terms of restrictions.

Antibiotics

You will be prescribed an antibiotic to take for several days. This is used to prevent infection and decrease swelling. Take the antibiotic as directed. If you develop a rash or diarrhea (possible risk of antibiotics and other medications), stop the antibiotic and contact our office immediately

Nasal Splints

Splints are places inside your nose to help the healing process and support the healing tissue. The splints are typically held in place with a stitch in the front portion of your nose. Although splints are used to provide the best long-term outcomes, they can produce some temporary problems. First, the splints often become coated with dried mucus and/or blood. If this happens patients may then be unable to breathe through their nose. The splints themselves or the stitch can cause some discomfort in excess of the typical surgical discomfort. Finally, your nose may also appear wider with the splints in place. All of these are temporary changes that should resolve once the splints and the stitch are removed at your post operative follow up appointment.

Nasal saline mist and irrigations

Start rinsing your nose with nasal saline mist the day after surgery. The **saline mist should be used at least 4 times per day and it is recommend to apply polysporin after the mist to help moisturize the nose** . If nasal splints are also placed in the nose (often done if septoplasty is performed), irrigations will start once the splints are removed, typically 5-7 days after surgery. It is important to do saline rinses up to 4 times per day after the splints are removed. Nasal saline

irrigations are very important because they flush out dried blood, dissolvable packing, and mucus. Irrigations help the healing process and decrease the chance of a postoperative infection, which is a major cause of poor healing and a need for additional sinus surgery. If the irrigations cause substantial bleeding or pain, let our office know right away.

Physical Activity

It is important to walk at least three times a day starting the day after surgery. Walking and spending time out of bed (walking or in a chair) rather than in bed are helpful because they reduce the risks of developing pneumonia or blood clots in the legs. However, it is also very important you avoid strenuous activity for two to three weeks following surgery as it typically raises your heart rate and blood pressure which can increase swelling or cause bleeding.

Jaw discomfort or ear problems

It is common to have jaw pain or ear symptoms such as pain, pressure, or fullness. This should improve within 1-2 weeks following surgery. Swelling in the throat can interfere with your ability to clear or pop your ears and it can also be sensed by your body as pain coming from your ears even though the ears are not affected (called referred pain).

Sleep with head elevated (at 45 degrees) for at least three days

Elevating your head during sleep decreases blood flow to the head and neck regions. Therefore, it decreases swelling and the associated pain. Elevating the head during sleep may also improve breathing. We recommend elevating your head during sleep at 45 degrees for at least three days following the procedure. Another thing that may reduce swelling is to use ice or something frozen (peas in a bag). If available fill a rubber glove half way and freeze to slush then place on your forehead with fingers down around your nose. Be careful not to put pressure on the rest of the bridge of your nose, as that will not only be painful but can affect the healing process and/or move your septum.

Proceed to your nearest emergency room as soon as possible or call 911 anytime you think you may need emergency care. For example, call if:

- You passed out (lost consciousness).
- You have sudden chest pain and shortness of breath, or you cough up blood.
- You have severe trouble breathing.
- You develop a teaspoon or more of bleeding that lasts for longer than 15 minutes.

If you have non life threatening questions and are unable to reach me directly by phone, please email the office at sleepsurgerycanada@icloud.com or you can call Alberta Health Link and speak with a nurse 24/7 by dialling 811 if:

- The dressing soaks through with blood and needs to be changed more than every 15 minutes.
- You have a fever with a stiff neck or a severe headache.
- You are sensitive to light, or you feel very sleepy or confused.
- You have pain that does not get better after you take pain pills.
- You have a fever over 38°C.
- You have double or blurred vision, cannot close your eyes, or have eye pain.

Risks of Surgery

- 1. Bleeding** - There is a small risk of bleeding. A major factor in preventing serious bleeding is to avoid the use of aspirin, NSAIDs (such as ibuprofen, Advil®, Motrin®, naproxen, or Aleve®), vitamin supplements, or herbal medications **for at least two weeks before and after surgery**. If you have more than a teaspoon of bleeding, you should notify our office immediately. Another procedure may be necessary to control the bleeding. If the bleeding is significant, immediately proceed to your nearest emergency department or call 911.
- 2. Infection** - Infection is rare but not impossible after surgery. The antibiotics given to you at the time of surgery will reduce the chance of infection and decrease swelling. Prescription mouthwash may be used as instructed by Dr. Chau. Patients should not use over the counter mouthwashes following surgery because many of these contain alcohol that can irritate the lining of the mouth and interfere with healing.
- 3. Dryness and crusting or change in your sense of smell** - These problems are usually temporary, but they may be permanent. Any surgery inside the nose can occasionally cause alterations in the sense of smell. Because smell plays an important role in taste, the sense of taste may also be affected. Your sense of smell may return, although changes may be permanent.
- 4. Septal Perforation or Septal Hematoma** - As the lining of the nose is raised off both sides of the septum, tears can develop in the lining. Because a deviated septum thins the lining of the nose in the area of deviation, tears are common. However, if tears develop in matching positions on both sides of the nose, a hole can develop after the septum has healed. This can create problems such as crusting or a whistling sound during breathing, although often no treatment is required. Additional treatment can include placement of plastic to plug the hole or additional procedures. If bleeding occurs after surgery and the blood is trapped underneath the lining, a collection of blood called a hematoma can develop. This can potentially become infected and then lead to a change in the appearance of the nose. The best way to avoid this complication is prevention. By following the postoperative instructions carefully, the risk of this complication is reduced.
- 5. Numbness of the teeth** - The nerves to some of the upper teeth pass through the nose, as the nose is directly above those teeth. These nerves can be damaged during a septoplasty. If numbness of these teeth does occur, the problem typically resolves over the course of weeks. However, this numbness can be permanent.
- 6. Continued snoring** - Usually snoring will improve dramatically, however, many patients will continue to snore to some extent, even after a successful surgery.
- 7. Need for additional procedures** - There is a chance that septoplasty will not be effective in accomplishing the goals of surgery. Another procedure may be necessary to provide the desired relief of nasal obstruction.