

Septoplasty & Sinus Surgery

Post-Operative Instructions

Preparing for Surgery:

- Do not eat or drink anything after midnight or 8 hours before scheduled procedure (including water, gum, hard candy, and lozenges). Limit alcohol intake and refrain from using tobacco products 24 hours prior to surgery.
- Bathe or shower the morning of surgery to minimize the chance of infection. Teeth may be brushed, but do not swallow any water.
- Notify your surgeon if you develop a sore throat or fever.
- Prepare your bedside at home with items you will want to have within reach (telephone, medications, water, etc.).
- Wear comfortable clothing and remove all jewelry.
- Arrange for transportation to and from the hospital, as you will be unable to drive.
- No Aspirin or Aspirin-like products (e.g. Ibuprofen) two weeks prior to surgery.

What to bring to the hospital:

- Insurance cards and forms
- List of medications you take regularly

- You may have splints in your nose for 1 week following surgery; this may make breathing through your nose difficult. A humidifier or vaporizer may be used in the bedroom to prevent throat pain with mouth-breathing.
- Frequent hot showers, breathing in steam from a pot of boiling water, or gently spraying a small amount of saline nasal spray (i.e. Ocean or Ayr nasal spray) into your nose will help break up congestion and clear any clot or mucus that builds up after surgery. You may also clean the front of the nose and nostrils with a Q-tip dipped in hydrogen peroxide or warm soapy water; do not pull at the splints or the suture holding them in place.
- Change the moustache dressing as often as needed. Some oozing of blood and mucus is expected for 2-3 days after surgery, and the dressing may need to be changed frequently during the first 24 hours following surgery. In case of profuse nasal bleeding, apply ice to the bridge of the nose and pinch the nose just above the tip and hold for 10 minutes; if bleeding continues, contact our office or answering service. You should also consider reporting to the Emergency Department if it is severe.
- Do not blow your nose until cleared to do so.
- You may take all of your routine medications as prescribed, unless told otherwise by Dr. Beasley or his PAs.
- It is OK to substitute Tylenol if the pain medication is too strong or causes nausea. Consider alternating ibuprofen/Motrin/Advil or naproxen/Aleve with the prescription pain medication (i.e. take the anti-inflammatory every six hours, alternating with the prescription pain medication every 6 hours, so that one medicine or the other is taken every three hours). The prescription pain medication taken along with a medication that has anti-inflammatory properties has been proven to be very beneficial for pain relief while recovering from surgery.
- Antibiotics are used in the initial post-op period to prevent infection while the sinuses are healing. Ensure you finish all of them, unless you notice an adverse reaction. Call our office if this occurs. In an effort to avoid common reactions, we recommend taking pro-biotics or yogurt with each dose of the antibiotic.

Continued on reverse



**Saint Alphonus
Medical Group**

EAR, NOSE & THROAT

If you have any questions or concerns, call your physicians office:
Boise or Nampa (208) 302-1000 | Ontario (541) 881-2350

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Recommended Irrigation Frequency:

(starting 1 week AFTER surgery):

- 3-5 times daily for 1 week
- 2-3 times daily for the next two weeks
- 1-2 times daily for the next one to several weeks

Nasal/Sinus Irrigation:

- 2 cups warm water
- 1/2 tsp. salt
- 1/2 tsp. baking soda



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EAR, NOSE & THROAT

- It is important to stay well hydrated after surgery. Constipation is a common side effect of prescription pain medications. Take a mild laxative, such as Miralax mixed in 8 ounces of liquid. Avoid straining with bowel movements.
- Sleep with an extra pillow or two, elevating your head slightly. You do not need to sleep sitting up in a chair.
- There are no diet restrictions, but alcohol consumption is not recommended and tobacco use is prohibited as Nicotine decreases blood flow to the healing nasal tissues and can actually compromise wound healing. Please make sure that you have eaten something the morning of splint removal; low blood sugar may make you feel faint when the packs are removed.
- No heavy lifting (nothing more than 10 lbs), no bending or stooping to lift, and no vigorous exercise until at least one week after surgery and cleared by Dr. Beasley or his PAs.
- No airplane travel for 2 weeks following sinus surgery; the cabin pressure changes can cause pain and swelling within the sinuses. You may fly sooner after nasal septal surgery alone.
- You can expect to have a stuffy nose for about 3-5 days after surgery, with some intermittent congestion for up to 2 weeks depending on a personal history of allergies or other factors. Sense of smell will be diminished during this time and sense of taste may also be affected. There may be some tenderness or numbness in your upper teeth. You may express old clot and discolored mucus from your nose for up to 3-4 weeks after surgery, depending on how frequently and how effectively you irrigate your nose with the saltwater spray.
- Signs of a post-operative infection, which may occur within the 6 weeks after surgery, include fever, foul odor in the nose, discolored nasal secretions, facial pain and pressure, and a cough. If any of these signs develop, contact Dr. Beasley or his PAs to discuss treatment.
- After splint removal, patients are seen back in the office approximately 7 days later. Sinus debridement/cleaning is performed at this post-op visit and small tampons or spacers may be removed from the sinus cavities. Debridement may be repeated again 1-2 weeks later. This is done to remove blood, mucus and crusts that build up in the sinuses which could lead to infection or further obstruction.