

The following guide contains postoperative care and instructions for you and your caregiver's review prior to your procedure and as a reference guide for after your surgery. By becoming familiar with your postoperative course, you will maximize your therapeutic benefit and reduce unnecessary anxiety. Please feel free to call or note any questions for your next visit with Dr. Pasha regarding any information on this sheet.

What supplies should I acquire prior to my operation?

- 1. Bedside Humidifier:** a small bedside humidifier (warm or cool mist) reduces throat discomfort caused by mouth breathing at night.
- 2. 4X4 Gauze (1 box):** for the first few days you will be required to change your nasal drip pad often (as much as every hour for the first 12 hours), by the 3rd day you may only need to change it a few times during the day.
- 3. Paper Tape or Disposable Face Masks:** paper tape may be used to keep your drip pad under your nose, if your skin is sensitive, you may consider using a disposable facemask to cradle the gauze.
- 4. Hydrogen Peroxide and Cotton-tipped Swabs:** after your surgery, you will have crusting and clotted blood at the opening of your nostrils. By mixing a solution of 1/2 water and 1/2 hydrogen peroxide and using a cottoned tip swab you can dissolve most of the debris safely without disturbing the splints.
- 5. Nasal Saline Spray (Ocean™ or Ayr™):** there are many brands of saline (salt-water) nasal sprays available over-the-counter. This is the most important medication you will need after you surgery. See below for usage.
- 6. Oxymetazoline (Afrin™) nasal spray:** this over-the-counter spray may be used to reduce minor bleeding from the nose especially 2 days after the removal of the nasal packing.
- 7. Your Prescription Medications:** For your convenience, Dr. Pasha typically will arrange for your prescription to either be called into your pharmacy or be given to you on a prescription pad. Filling your prescription prior to the procedure allows you to be assured that you will have the proper postoperative medication.

What other arrangement should I make?

Caretaker: For at least the first few days, you will need someone to watch over you as you recover. This person must be a responsible adult that is also familiar with these instructions. Dr. Pasha usually reviews postoperative care with the caregiver immediately after the surgery. It is therefore; best that the caregiver be present the day of the procedure to take you home.

Sick Leave: Ideally you should anticipate a one-week recovery period when the splints are removed. Typically, however, one should anticipate that most of the "pain" of the procedure should be resolved within a few days. The

discomfort of the procedure is typically caused by not being able to breathe through your nose until your splints are removed. If you choose you may resume non-strenuous activity after a few days.

What should I expect immediately after my operation?

Although nasal surgery involves anesthesia for 30-90 minutes, you will wake up in the recovery room seemingly instantly after your induction of your anesthesia. Nursing staff as well as others will be asking you questions and checking your vital signs. You may be quite sleepy and irritable and may not remember the immediate recovery period. This tiredness may continue for much of the day. You will more than likely not be able to breathe through your nose and will have to breathe through your mouth. The anesthesia may also cause you to feel nauseated. Within 24 hours, your nausea should resolve.

What other things should I expect after the operation?

Nasal Discharge: It is normal to expect discharge from your nose throughout the week. The first 1-2 days may be bright red blood that requires changing the nasal drip pad every few hours (possibly every hour for the first 12 hours). The majority of the drainage after the first few days will be blood stained nasal drainage. Cleaning the nasal tip with ½ hydrogen peroxide and ½ water with a cotton-tipped swab may lessen the discomfort.

Nasal Blockage: The most uncomfortable part of nasal surgery is typically from not being able to breath through your nose. The plastics splints that are placed on each side of the nose cause this blockage. If you have minimal drainage, you may be able to pass air through the “channels” within the splints. Most of the time, these “channels” become plugged with mucous and clotted blood. The bedside humidifier should reduce the throat discomfort caused by mouth breathing.

Fever: Low-grade fevers (<100.5° F) are acceptable after surgery. Your pain medication contains acetaminophen (Tylenol™) that lowers fevers.

Bad Breath and Throat Discomfort: After surgery, breathing through your mouth may result in bad breath and throat discomfort. This usually resolves quickly once your packing is removed.

Mucous in the Back of the Throat: Because of irritation of the nose and mouth breathing, you may experience thick mucous in the back of the throat. Frequent sips of water may manage this discomfort or you can use over the counter medication that contains guaifenesin such as Mucinex™ to thin your secretions.

Headache and Nasal Pain: For the first day after the operation it is not unusual to have a mild headache and nasal pain. This typically resolves within the first 48 hours.

Numbness of the Upper Teeth: Occasionally, one may experience some numbness of the upper jaw. This sensation typically begins to resolves within a few weeks although it may not complete recover until after a few months.

Should I expect facial swelling and bruising around the eyes?

No, not really. For the standard septal, turbinate, or sinus operation, there is minimal facial swelling except around the nose. Bruising is unusual and should be reported if this occurs.

What medicines will I be given after my operation?

When you are discharged after the operation Dr. Pasha will provide you with two prescriptions: pain medication and an antibiotic.

Pain medication may be taken initially (“around the clock”) every 4 hours (or as prescribed) for the first day then only as needed. You may not drive, climb ladders, or operate any machinery when you are on pain medications.

Antibiotics must be taken for the full course. Antibiotics prevent infection and allow you to heal better. If you miss a dose or two you should not be alarmed and continue with your scheduled dosing without taking any extra medication to “make up for it.” If you develop a rash stop the medication immediately and call Dr. Pasha.

Do not take any aspirin, anti-inflammatory products, or blood thinners unless instructed by Dr. Pasha for two weeks. They may increase the chance of bleeding.

***NOTE for Females using Birth Control:** some antibiotics and pain medications may neutralize the therapeutic effect of birth control pills allowing for conception and resulting in pregnancy. Alternative forms of birth control should be utilized.*

How and when do I use my nasal sprays and ointments?

Nasal Saline Spray (Ocean™ or Ayr™): Saline (salt water) spray is your most important postoperative medication. It keeps the nose moist to avoid crusting and encourage healing. Although nasal sprays are not as affective until the splints are removed, you may use the spray as often as you wish (at least 10 times a day). Please see below on how to keep your nose clean after your operation. You should keep a bottle with you at all times. You can not overdose on saline spray since there is no prescription medicine in the spray. Nasal saline sprays are available over-the-counter.

Oxymetazoline (Afrin™) nasal spray: Although rarely used, oxymetazoline (an over-the-counter spray) may be used to reduce minor bleeding from the nose especially 2 days after the removal of the nasal splints.

Bactroban or Bacitracin Ointment: If prescribed, this antibiotic ointment may be used with a cotton-tipped swab in the nostrils 2 times a day to keep the nose moist and reduce infection.

Dr. Pasha told me the most important thing is to keep my nose clean. How do I do that?

1. Mix a solution of 1/2 water and 1/2 hydrogen peroxide and use a 4X4 gauze pad to wipe the excess debris from your nose.
2. Using the same 1/2 water and 1/2 hydrogen peroxide solution, use a cotton-tipped applicator to clean the clotted blood and crusting inside of the nose. You do not have to worry about damaging anything because the splints

will not allow you to go to far. The splints are sutured (tied) in place and will not move significantly.

3. Using the salt water spray, spray the inside through the splints keeping the nose moist.

Repeat 5-20 times per day!!!!

What other things should I do to help healing and reduce any discomfort?

- Dr. Pasha recommends a cool-mist steam humidifier for 15 minutes every 6 hours during the day for the first week and during sleep for the first 4 weeks. Steam Inhalers are available at drug stores. A humidifier at bedside moistens the nose and throat (reduces throat discomfort from mouth breathing).
- Ice reduces edema (swelling) of the nose and face. Using ice is typically not necessary, but may be considered for select cases. For the first 24 hours you may place an ice pack gently on the nose. If you do not have an ice pack, you may use a washcloth wrapped in ice.
- You may change the drip pad under the nose as often as necessary with gauze and tape (this may be purchased at any pharmacy without prescription).
- Dr. Pasha advises that you keep your head above your heart at night (two pillows) to keep swelling down for the next few weeks.

What can I eat after the surgery?

Before you leave the hospital or surgical center, the nurses will make sure you are able to tolerate liquids. For the first day of recovery, you should limit your diet to light meals avoiding foods that may cause nausea such as oily or heavy meals. Generally, after the first few days, you may advance your diet to what you can tolerate.

When can I travel?

Ideally, you should avoid any long travels for at least two weeks after you surgery unless cleared by Dr. Pasha. You have the potential to have postoperative bleeding that may require Dr. Pasha's attention.

What other restrictions will I have after the operation?

- You should avoid **any straining or vigorous activity** including bending over, lifting heavy weights, and most sports for at least two weeks. **Avoid hitting or bumping your nose.**
- Do **not** blow your nose! If you need to sneeze or cough, do so with your mouth open while the splints are in place (7 days). After the splints are removed, **gentle** nose blowing is encouraged to clear the nasal passage of crusts and debris.
- You may return to work or school whenever comfortable; a week is average after the splints are removed, but returning to work after a couple of days with your splints in your nose is not unusual.

- Baths and showers are acceptable as long as you avoid getting the dressing and tape wet. **(If you have a splint outside your nose – do not get the splint wet)**
- Smoking decreases healing effectiveness and increases complications. If you're a smoker, this would be a good time to try to stop smoking. Please contact your primary care doctor on techniques and possible aids to help you quit smoking.

When will my splints and packing be removed?

Nasal splints are plastic and are placed on either side of the nasal septum for support. They have holes in them to allow for airflow but are frequently blocked by crusting and debris causing nasal obstruction and mouth breathing. For most, being unable to breathe through the nose causes the most discomfort. The splints are removed after one week and typically cause instant relief and rapid recovery.

Dr. Pasha rarely uses formal nasal packing unless there is significant bleeding. Dissolvable packing does not need to be removed and dissolves within a few weeks after the procedure. For those instances when formal nasal packing is required, it typically is removed from 3-7 days after the surgery depending on the procedure. During this time you must continue taking antibiotics to avoid infection.

When should I call the office?

Dr. Pasha may be reached for emergencies at any time. Please contact the office or report to the emergency room if any of the following occur:

Bleeding: Significant bleeding is rare. You should anticipate active bleeding for the first 48 hours and becoming sporadic for up to one week. For the first 6 hours you may need to change the dressing every hour. If you experience a constant drip from your nose or mouth then call Dr. Pasha immediately. If you bleed just a little, you may try Oxymetazoline (Afrin) nasal spray to stop the bleeding. Vomiting old clotted blood may also occur within the first day. If the vomiting persists, then you should also contact the office.

Dehydration: If you cannot tolerate liquids for 24 hours, notify Dr. Pasha. Signs of dehydration include lethargy, and reduced or very concentrated urine.

High Fever: Temperatures greater than 101° F, or when accompanied by cough or difficulty breathing, should be reported.

Difficulty Breathing: If you have any difficulty breathing, notify Dr. Pasha and report to the emergency room.

Blurred Vision: If you have any change in vision, call the office immediately.

Persistent Clear Drainage: Clear drainage normally drains for the first few days. If clear drainage persists after removal of the splints you should notify the office.

What about stitches? A few absorbable stitches are used in the front portion of the nasal septum and do not to be removed. The black sutures, which can be seen around the splints, are removed with minimal discomfort when the splints are taken out.

The inside of my nose on the right side is tender? The only incision that is made in the nose is on the right side, midline at the entrance of the nostril. You will not be able to see the incision. If you press on the incision, it will be tender. This tenderness resolves after a few weeks and is the last area to heal.

When do I return to clinic for follow-up? Schedule an appointment with Dr. Pasha within 7 days after the operation. It is your responsibility to schedule and keep your appointment.

What is a sinus debridement and when does this occur? If you had a sinus operation, debris and crusting accumulates within the opening of the sinuses. At **two weeks**, Dr. Pasha will perform a sinus debridement in the office by removing the crusts and debris using a microscope. Periodic removal (every 3-12 months) of this material improves healing, lessens scarring, and reduces recurrence.
