

POSTOPERATIVE CARE INSTRUCTIONS FOR TONSILLECTOMY/ ADENOIDECTOMY PATIENTS

Age 11 years old and younger

Diet

It is extremely important that the patient drink large amounts of fluids daily for two weeks. There are no restrictions on what the patient can eat, but they will likely better tolerate soft or semi-solid foods. Failure to drink increases the risk of bleeding, increases nausea and increases the pain felt in the throat.

Pain

With tonsillectomy, you can expect throat and ear pain, possibly up to two weeks after surgery. Adenoidectomy patients often feel head and neck pain for up to seven days after surgery.

Take prescribed medication as follows:

Tylenol/acetaminophen and Motrin/ibuprofen: Beginning on the day of surgery, alternate Tylenol					
with Motrin/ibuprofen	, every three	hours.		DOSAGE	
	DOSAGE				
Prednisolone: Take	in the morning on	,		and	
	DOSAGE	DATE	DATE	DATE	
Tetracaine Lollipops: Use between doses of Tylenol and Motrin for breakthrough pain. Do not chew the lollipop.					

Tetracaine Lollipops: Use between doses of Tylenol and Motrin for breakthrough pain. Do not chew the Iollipo Place back in the container or bag between uses.

It is helpful to take medication with a little food to help with nausea. Again, drinking large amounts of fluids reduces pain most effectively.

Activity

We recommend that you avoid strenuous activity for two weeks after surgery. This includes sports activities, bicycling, swimming, weight lifting, exercise, P.E., recess, dance, gymnastics, etc. Patients may return to work/school as they feel able (usually one week for children, two weeks for adults). We will provide notes for school or work with restrictions if needed upon request.

Bathing

The patient should avoid hot showers or baths for two weeks after surgery. Warm or cold showers or baths are acceptable.

Fever

A low-grade temperature (99–101 degrees) is common during the first two to three days after surgery. Fever over 100 degrees may indicate that the patient is not drinking enough, and they need to increase their fluid intake. If fever exceeds 102 degrees, please notify the physician.

Bleeding

Small amounts of blood-tinged mucous from the mouth or nose are not uncommon. You should report any bright red blood <u>immediately</u>. In the event of bleeding from the mouth, the patient should hold extremely cold/ice water in the mouth consistently for a period of 30–45 minutes to help slow the bleeding. If bright red blood appears from the nose, you may use Afrin[®] spray or drops in the nose.

Please contact our office at 478-743-8953 if you have any questions or concerns.

PLEASE ATTEMPT TO CONTACT OUR OFFICE FIRST SO THAT WE MAY ADVISE YOU APPROPRIATELY. IF, FOR ANY REASON, YOU ARE UNABLE TO REACH OUR OFFICE OR YOUR SURGEON IN AN EMERGENCY, PLEASE GO TO THE NEAREST EMERGENCY ROOM.