

ENDOSCOPIC SINUS SURGERY WITH SEPTOPLASTY

Patient Instructions After Surgery

Activity Any reasonable activity is fine at any time, but refrain from strenuous activity (defined as high heart rate and lots of sweating) for 2 weeks after surgery to minimize the risk of nasal bleeding. Do not blow your nose for one week after surgery. To clear the nose, sniff the secretions back and spit them out. If you must sneeze, open your mouth and turn the sneeze into a cough to avoid nose pain.

Pain Congestion and stuffiness, similar to a sinus headache, are generally the most bothersome symptoms the first week. Pain after surgery should generally be mild to moderate, and your pain medication should help. Pain medication cannot be expected to *entirely eliminate* pain. You should not have swelling or discoloration on the outside of your nose or face. Severe eye pain, particularly if accompanied by decreased vision or double vision, should be reported to the doctor immediately. Do not take aspirin, ibuprofen, or other anti-inflammatory medications for ten days prior and two weeks after surgery, as these medications thin the blood and increase the risk of bleeding.

Bleeding Mild, intermittent bleeding is common during the first one or two days after sinus surgery. Should bleeding be persistent or profuse, you should contact the doctor. At the surgery facility a small piece of gauze is often taped under the nose to prevent dripping of blood or mucus. This practice may be continued at home as long as necessary, but nothing needs to be put on or under the nose once secretions slow down. Cleaning blood or mucus from around the nostrils is fine anytime. Rarely, profuse bleeding can occur on a delayed basis up to two weeks after surgery, and for this you should contact the doctor.

Cleaning No specific cleaning or maintenance regimen needs to be done by patients during the first week after surgery. The nose is typically congested and sore on the inside, and aggressive cleaning efforts are usually more bothersome than helpful. Over-the-counter decongestant nose sprays containing the active ingredient 'oxymetazoline' (such as Afrin, 12-hour, Sinex, 4-Way, or Dristan) can be used during the first week to help keep the nose clearer, but nothing really works except giving it time to heal. Medications often tried before surgery such as antihistamines, decongestants, and nose sprays will give little or no benefit to the nose and sinuses during the healing period and they do not need to be taken. Many times an effort is made to discontinue these medications after a successful surgery. Your doctor will typically clean your nose thoroughly at postoperative visits (generally twice in the first 2-4 weeks) and these visits are important both to feel better and to assure proper healing.

Other During surgery, a small gelatin roll(s) may be placed in the sinus opening(s) deep in the nose to improve healing. These are too small and too soft to see or feel and they just dissolve without noticing. Occasionally one slips out and you may see it (they look like pieces of clear tape folded over). This is not a problem and it does not need to be replaced. Splints (soft plastic pieces placed inside the nose to help things heal properly) may be used if the septum was straightened also. Splints are not typically visible from the outside and are easily removed in the office at your follow-up appointment. Splints are not the same as nasal packing, which can be avoided in almost all cases.

Additional Information:

Call Ear, Nose & Throat Specialty Care at (214) 826-3681, or for emergencies after hours call (214) 346-1359