

Discharge Information: post Nasal Surgery

Dear Patient/Carer:

Please read this document carefully as it contains important information that complements the instructions given by your MEG ENT Specialist during your recent surgical admission.

Medications:

Pain Management:

- You should receive analgaesics and instructions (***e.g. Paracetamol, oxycodone, ibuprofen***) prior to your discharge from hospital.
- Use as directed.
- Most patients experience some discomfort in the nasal area.
- The nasal passages may still feel blocked for some weeks after the surgery.
- Sometimes pain in the nose/sinuses can also cause an ear ache/pain which can be controlled with pain medication prescribed.

Antibiotics:

- Oral Antibiotics ***may*** be prescribed and dispensed to you prior to your discharge from hospital.
- If prescribed, it is usually to prevent infection in the first 5-10 days after the surgery, but it may also be to treat a sino-nasal infection that was seen during the surgery.
- Use as directed.

Tranexamic Acid (TXA):

- This is a medication that is used to help blood clots to form and stabilise in wounds, such as the tonsillar or adenoid area, or nose.
- It can reduce the risk of bleeding/re-bleeding and so it may be used as a preventative medication in the first two weeks after surgery, or if you/your child has a bleed in the first two weeks after surgery.
- Your ***MEG surgeon*** may prescribe this for you/your child to take in the first 2 weeks after Adeno-tonsillectomy, as an oral tablet – use as directed.

Nasal sprays:

- Nasal Sprays / Rinses ***may*** be prescribed from the day after to clear any crusting that may develop.
- The sprays work by flushing a solution into your nose. This will clear away any debris and allow better healing and make breathing through your nose a little easier.
- Use as directed.
 - The ward nurses and/or pharmacist will give you instructions prior to discharge.
 - Sprays are to be commenced the morning after your surgery.

Resumption of “Blood Thinning” Medications:

- Prescribed Blood Thinning Agents
 - *e.g. Aspirin, Warfarin, Clopidogrel, Rivaroxaban*
 - Your **MEG ENT Specialist**, in discussion with your **GP/Physician** will instruct you on when to recommence these medications
- Over the counter blood thinning agents
 - *e.g. Krill Oil, Fish Oil, Ginseng, Gingko, Garlic, etc.*
 - You can restart these medications **2 weeks** after your surgery.

Wound Care:

Bleeding:

- There may be a slight mucous discharge from the nose with very occasionally a slight blood tinge.
- There is **no need for concern unless** there is fresh bleeding (ie: bright red blood), that doesn't cease after first aid measures described below.
- **First Aid** If you experience any bleeding:
 - Suck on ice
 - Lean forward and pinch the soft fleshy part of the nose in order to pinch the nostrils closed.
 - Hold this continuously for 10 minutes
 - Check for bleeding
- If bleeding continues despite the above measures, or you are concerned you should:
 - Present to the nearest Emergency Department
 - Call 000 and ask for an ambulance

Splints:

- You **may** have splints inserted into your nose during the operation.
- They are there to improve healing; they are silicon and are held in place with a stitch.
- They will be removed at your first post-op clinic appointment one week after you are discharged.
- You **may** be prescribed antibiotics to take whilst the splints are in place.

Diet:

- Generally there are no post-operative dietary restrictions, though your **MEG ENT specialist** may suggest avoiding hot foods in the first 72 hours to minimise the chance of bleeding.

Return to Normal Activities:

- You will usually require 1-2 weeks leave from work for recovery.
- **First 72 hours:**
 - Avoid steam, hot drinks and showers (warm is fine) as this may cause a nose bleed.
 - Try to sleep with your head elevated (**e.g. 2-3 pillows**)
 - Do not operate any heavy machinery or sign important documents in the first **24 hours** after your operation, as your judgement may be impaired/clouded.
- **Week 1-2 post op:**
 - Do not pick or blow your nose.
 - Sniffing is allowed.
 - Avoid sneezing through the nose (Keep your mouth open - covering your mouth).
 - Gently dab any nasal discharge with a tissue
 - Have relative rest, avoid straining, avoid lifting heavy objects
 - Avoid bending over.
 - If you need to pick up objects from the floor, do so by bending your knees and keeping your head up if possible
 - Avoid Swimming, Spas.
 - Avoid taking flights if possible.
- **Week 2-4 post op:**
 - You may now restart slowly all previous levels of physical exercise (including sports).
 - Avoid contact sports however until 4 weeks post op.

Attend your nearest Emergency Department or Local GP Clinic if.

- You experience bleeding that continues longer than 10 minutes (straight to Emergency Department – See above)
- You have increasing Pain and/or discharge
- You have a Fever or feel increasingly unwell.
- Your **MEG ENT Specialist** will be keen to provide any advice/assistance required to your GP or emergency staff.

On your Postoperative Appointment:

- Your **MEG ENT Specialist** will remove any internal nasal sutures and/or splints and clean your nasal passages.

We will confirm the time and date of your post-operative appointment soon. Do not hesitate to contact us if you require any further information regarding these instructions.



1300 952 808



(03) 9429 3627



MELBENTGROUP.COM.AU



LEVEL 1 449 SWAN STREET, RICHMOND VIC

ABN 88 181 798 030