

Adenoidectomy

Comfort Measures:

- Sleep and rest with your head elevated on extra pillows for the first couple of days. This helps to decrease the swelling and pain. Moderate to severe pain is typical during the first week.
- Ear pain is a common complaint. (This is referred pain from the throat and is usually not an ear infection.)
- Pain medication will be provided for you. It is best to take the medication regularly for the first few days and “stay ahead” of the pain. If you wait to take the pain medicine when you are in severe pain, it will not help as well.
- You can reduce the frequency in a few days when you are feeling better. Do not take any type of aspirin, Motrin, Advil, Aleve, Ibuprofen, etc. as these thin the blood and may increase the chance of bleeding. Tylenol is acceptable, as long as it is not an ingredient included in your pain medicine.
- When you look in the back of the throat, there will be a white or cream-colored area. This is a temporary, normal covering during the healing process and not a sign of infection. There may be blood tinged nasal drainage and saliva for the first few days. Regurgitation of liquids into the nose may occur and is almost always temporary.
- Post operative bleeding is uncommon, however, occasionally occurs. The greatest incidence is 10-14 days after surgery, when the “scabs” come off. If bright red bleeding occurs, gargle with ice water. If that does not stop the bleeding within 5 minutes, call your doctor and go to the emergency room.
- An antibiotic may also be prescribed. Be sure to complete the full prescription and do not stop taking your medication because you are “feeling better.”
- A low grade fever often occurs as part of the healing process.

Diet

- Constant sips of juice or water are extremely important in the first few days to prevent dehydration and to reduce pain and swelling. (Swallowing keeps the throat muscles loose, reducing pain.) Most liquids are acceptable but hot beverages, citrus juice, and tomato juice should be avoided since they may cause discomfort. Avoid red colored fluids and foods as they mask the presence of bleeding should it occur. Soft foods such as jell-o, custard, pudding, mashed foods, Ensure, ice cream, etc. are acceptable. Avoid any hot, spicy, crisp or hard foods such as chips, nuts, popcorn, hard candy, etc. for 2 weeks. To avoid possible injury to the throat, do not use a drinking straw.
- Nausea and vomiting are very common due to the blood swallowed during the procedure, minor oozing post-operatively, and general anesthesia. Expect to see blood in the vomit, this is normal. Nausea often subsides once the stomach is empty of the bloody drainage. Once nausea has subsided, start drinking clear liquids and progress slowly.
- Regurgitation of liquids through the nose with swallowing, or air escaping through the nose during talking may occur and is almost always temporary.

Activity:

- Rest the first 24 hours. You may resume light activity the day after surgery if you are up to it. Avoid any lifting or straining for one week as this can increase chances of heavy bleeding.
- Do not drive a car for at least 24 hours after surgery since the medications used to sedate you will remain in your system. Avoid driving while taking pain medication as well.

Notify your physician for any of the following:

- 1. Difficulty breathing or shortness of breath**
- 2. Fever 101 degrees or higher**
- 3. Bright red bleeding that is profuse or persists**
- 4. Inability to take adequate fluids by mouth or persistent nausea or vomiting.**
- 5. Green or yellow nasal drainage that develops or persists beyond the first week.**
- 6. Severe pain unrelieved by medications**