POST OPERATIVE INSTRUCTIONS
Septoplasty and/or Sinus Surgery

This sheet will tell you about post-operative care for the septoplasty patient. Please read these instructions carefully. If you have any questions or concerns, either before or following the surgery, please call the office at 540-347-0505.

The post operative patient will be discharged from the Outpatient Department of the hospital, after he/she is fully awake and the danger of serious bleeding is minimal. He/she may be drowsy and nauseated. Please allow the patient to rest as much as possible upon arrival at home.

1. **Nasal Drainage** -- Following surgery, there may (rarely) be nasal packing in the nose and a small mustache dressing under the nose to absorb the drainage. There may be internal splints in place, as well. At first the drainage will be bright red, but should change to pink within 24-72 hours. You will be instructed on how to change the dressing by the Outpatient Department staff prior to being discharged. This dressing may need to be changed frequently for the first day. Once the nasal packing and splints (if placed) are removed at the office several days after surgery, drainage may continue. Normally such drainage will be dark reddish brown in color or even a little yellow.

2. **Nasal Congestion** -- For the first week after surgery, swelling of the mucous membranes of your nose will make your head and nose feel quite stuffy. Please be patient because the stuffiness will gradually decrease over the next few weeks. After this, the improvement in your nasal breathing should be noticeable. If packing/splints are placed, they will be removed at the first office visit following surgery and much of the initial pressure will be relieved.

3. **Discomfort After Surgery** -- Discomfort after this type of surgery will consist more of an ache or pressure rather than actual pain. This pressure may increase somewhat during the first week. These symptoms arise from increased swelling and the accumulation of sinus secretions. Take, as directed, the pain medication that has been prescribed for you. If this does not relieve the discomfort, taking Sudafed over-the-counter may be helpful. If this still gives only minimal relief please contact us. **DO NOT TAKE ASPIRIN or IBUPROFEN**, or any products containing these ingredients, as they can increase risk of bleeding.

4. **Medications** -- Take the medications, as directed, that have been prescribed for you. Generally these include an antibiotic to prevent infection, something for pain relief, and something for nausea. Afrin may be purchased over-the-counter to be used 1 spray to nose 3 X per day for no more than 3 days as needed for epistaxis.

5. **Saline Sinus Flushes** -- You were given instructions for cleaning your nose with saline flushes. **Perform saline flushes into the nose FOUR TIMES PER DAY.** Your surgeon will inform when this should be started after surgery, but typically it should be started that evening. This will do more to help things heal as quickly and as comfortably as possible than any other intervention. Plan to perform flushes for 2-6 weeks depending on how things heal within the sinus cavities. Do not stop performing this until your surgeon says it is OK to stop.

6. **Stitches** -- It is not unusual to find some stitch fragments coming out the nose after septum surgery (not for sinus surgery). The stitches were placed to close the septum and are absorbable. As the body eats the stitches away, they will fall out. If they are hanging out and bothersome, you can gently pull on it or cut it off where you can still see it.

7. **Post Operative Visits** -- It is very important to keep all post-operative appointments. At these visits, the surgeon will clean and examine your operative area. The frequency of these visits varies, depending on your rate of healing. We recommend that you eat before arriving for your appointments and that you take your pain medication one hour prior to your first and second office visit. If you are taking a prescription pain medication with codeine, or something similar, please have someone drive you.
PRECAUTIONS DURING THE FIRST WEEK

Activity -- Even though your surgery may seem minor, your body needs additional time and rest for healing. Stay home the first few days and until you are seen in the office for the first post operative visit. Gradually increase your activity over a one week period. If approved by the physician, more intense physical activities such as swimming, jogging, aerobics, may be resumed after two to three weeks. But avoid bending over and lifting heavy objects (over 5 pounds) during the first two to three weeks. These activities place increased pressure on the operative site.

Do Not Blow Your Nose -- It is important that you do not blow your nose. You may sniff back secretions. Blowing your nose places too much pressure on the operative site and may cause bleeding. Usually you may blow your nose after the first or second visit to the office. Please check with the doctor while you are in the office to obtain clearance.

Sneezing -- If you must sneeze, do so with your mouth open. This will reduce pressure and discomfort to the operative site.

SUGGESTIONS FOR COMFORT
Keep the head elevated on 2 to 3 pillows. This position will help decrease swelling and allows for better drainage of secretions. Using a humidifier at your bedside for the first week may aid in relieving dryness. Keep plenty of liquids available, such as juices, water, & tea. You may also want to have some lip balm and hard candy on hand to ease the dryness caused by increased mouth breathing.

CALL YOUR DOCTOR IMMEDIATELY IF YOU HAVE ANY OF THE FOLLOWING:

1. Visual problems, such as loss of vision, double vision, black eyes or increased swelling of the eyes.
2. Neck stiffness (you are unable to touch your chin to your chest) accompanied by fever, extreme fatigue, and marked headache.
3. Fever over 101.5 degrees.
4. Excessive bleeding from the mouth or nose.
5. Increased anxiety or changes in behavior.