

## Nasal and Sinus Surgery Post Op Instructions

After surgery, bloody drainage from the nose for 24 to 48 hours is expected. This should decrease gradually over the first 48 hours, but may increase with increased activity. We avoid packing in almost all patients, however some physicians will put splints in the nose, which may need to be removed.

If you have steady, slow ooze from your nose, you may use a topical decongestant (Afrin® or Oxymetazoline-generic) to help slow it down. This may be used for 3 days only. A moustache dressing will be used to manage mild drainage.

Expect congestion that worsens over the first 12 hours and continues until your first post operative visit. Most patients will have difficulty breathing through their nose during the recovery and healing process. Along with this, you should expect some pressure and possible headaches. This will improve after your first post operative visit. A severe headache or neck stiffness should be reported to your physician immediately, especially if you have a temperature higher than 101.5°.

Nasal saline sprays often help with congestion after surgery. It also helps with crusting. Some physicians will recommend irrigations with 1 cup water and ¼ tsp of salt, using a bulb syringe or nasal saline spray, 4 to 5 times a day.

Warm showers and a humidifier may be helpful with congestion post operatively.

Please stop taking all nasal medications, other than nasal saline or Afrin®, after surgery until your first post op visit. Your physician will then instruct you.

Most often, there are no external signs of surgery. However, there is sometimes mild swelling or bruising around the eyes.

Avoid blowing your nose until instructed by your physician.

*(continued on back)*



No bending, lifting or vigorous activity until instructed by your physician at the first post op visit.

If you have to sneeze, please do so with your mouth open.

If you have been prescribed antibiotics or steroids, it is important to take them as directed before and after surgery to improve your chances of a successful result.

You will receive a prescription for pain medicine after surgery. Narcotic pain medicine will impair your reaction time and judgment. Take as needed, but do not operate motor vehicles or heavy machinery while taking the narcotic. If your pain is mild, Tylenol® or Acetaminophen may be used instead of the prescription pain medication.

Please avoid aspirin or anti-inflammatory products (Advil®, Motrin®, Ibuprofen) until after your first post operative visit when your physician will direct you.

Typically, air travel is discouraged for 2 weeks post operatively.

You should not have problems with your vision following surgery. Please report any abnormal blurring, double vision, loss of vision, black eyes, severe redness or bulging around the eyes to your physician.

A low grade fever is common. However if your temperature is higher than 101.5° please contact your physician.

Slowly resume normal activities, other than strenuous exercise, as tolerated.

Begin with bland foods and advance to your normal diet as tolerated.

Sleep with your head slightly elevated for 2 to 4 days to decrease swelling and allow for drainage.

Ice to the face will help any bleeding, swelling or discomfort for the first 48 hours.

