

Sinus Surgery: Home Care

1. DRIP PAD

- When packing is used, nasal secretions will collect at the front of your nose. A small amount of blood will be mixed with this watery mucus. The drip pad is a small (2"x 2") gauze which you can secure under your nose with a single piece of tape from cheek to cheek. Gauze and tape can be purchased in any pharmacy if needed. If a rash develops under or around the tape, discontinue it; you may have an allergy to the adhesive.
- You can change the drip pad whenever it is saturated. It would not be unusual to change the pad two or three times an hour for the first few hours and then once or twice an hour.
- A drip pad is rarely needed after the nasal packing has been removed.

2. ANTIBIOTICS

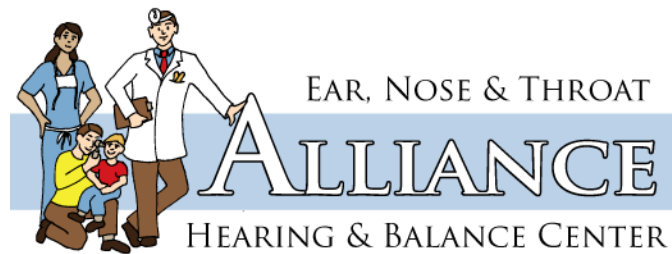
- You probably have a prescription for an antibiotic (for example, cephalexin or amoxicillin). Take the first dose within a few hours of returning home.
- Stop taking the antibiotics immediately if you develop a rash or itchiness anywhere on your body. Then call your doctor.

3. PAIN

- There may be some pain, but usually you should be experiencing a pressure sensation. This may be unpleasant and may cause a headache.
- In many cases Tylenol (acetaminophen) alone offers control of the discomfort.
- Your doctor will probably also give you a prescription for Tylenol (acetaminophen) with codeine (hydrocodone) or a similar drug such as Vicodin or Darvocet. On the one hand, use the lowest dose that is effective. On the other hand, the medicine is more effective if you do not let the pain return to its most intense level before the next dose. These narcotics usually give adequate pain relief but also have many side effects. Do not exceed the recommended dosage.
- Use codeine with caution. Codeine often causes mild to moderately uncomfortable abdominal cramping and nausea. This is less likely if you take it with food. With repeated usage codeine also causes constipation. When taking codeine it is recommended to use a stool softener (such as Metamucil or prunes) or a laxative. Blood swallowed during or after surgery can be a laxative and it may turn your stools black. Codeine and similar narcotics cause drowsiness and impair your reflexes. When taking these drugs, you should not drive.

4. NAUSEA

- Nausea is often an unpleasant side effect of general anesthesia, but is usually not severe. That effect will usually wear off within six hours after surgery.
- If there is any bleeding from the back of your nose and you swallow it, the blood in your stomach may make you nauseated. If you vomit, it will look like coffee grounds.
- Nausea can be treated with Dramamine, which is available in most pharmacies. In the unlikely event that the nausea is severe or persistent. Call your doctor.



5. NASAL PACKING

- Your nose may have packing that will completely obstruct your nose. This may cause an unpleasant pressure sensation, but the packing is used to prevent bleeding.
- The nasal packing will either tied at the front of your nose or taped to your cheek.
- You may find it easier to sleep sitting up in a chair or with your head elevated on several pillows. Unfortunately you should not expect a good nights sleep until the packing is removed.
- With your nose blocked you may experience a dry mouth and your throat may be sore. Sipping water frequently and using a humidifier will help.
- Your ears may feel plugged and your eyes might water, but these sensations will gradually clear after the packing is removed.
- Packings are removed in the office one or two days after surgery and you will then feel much better.

6. INCISIONS

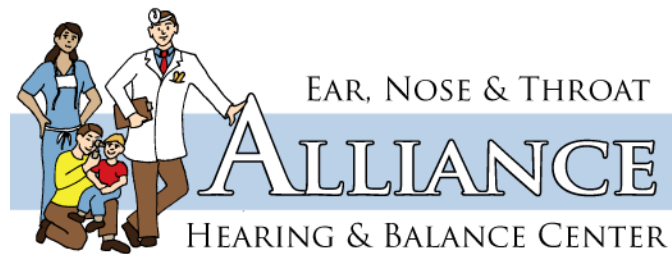
- In most cases all of the incisions are made just inside your nose. They should be difficult to see but you may feel some of the suture material that is used to close the incisions. This suture is absorbable but may take weeks to dissolve. **If you are experiencing crusting within your nostril, you can apply antibiotic ointment, such as Neosporin, Bacitracin, Bactroban, and Triple antibiotic ointment, inside your nostril with a Q-tip twice daily.**
- There are procedures that require incisions on the outside of nose. The most commonly used incision is placed between the nostrils where it will usually be difficult to see. You should clean this incision with peroxide daily and apply antibiotic ointment, such as Neosporin, Bacitracin, Bactroban, and Triple antibiotic ointment twice daily. These sutures will need to be removed by the surgeon. This procedure will also result in a temporary hardness and numbness of the tip of your nose. This will return to normal over the course of several weeks or months.

7. SPLINTS

- Thin sheets of plastic about the size of a quarter are often placed inside the nose, one on each side of the septum to support it during the first 1-2 weeks of healing. These splints are held in place by a small suture and are removed in the office.
- In some procedures a small metal splint is attached to the outside of the nose. Your doctor may remove this in the office or allow you to do so at home.

8. RECOMMENDATIONS

- **Do not blow your nose** until you discuss this with your doctor.
- **Open your mouth when you sneeze.**
- **Lean forward and gently spit out any blood** that you see, feel or taste in the back of your mouth.
- **Ice can help to control pain and swelling,** but, since pain and particularly swelling are not common problems with this operation, it is usually not needed. If used, the ice should be sealed in a plastic bag and always separated from direct application on your skin to avoid freezing. For the same reason, it should not be applied for more than 20 minutes of any hour. Ice is not recommended after the first 24 hours after surgery.
- **No showering until the nasal packings are removed.** After removal of the packing, showers are recommended for moisturizing your nose.
- **After the nasal packing is removed, you can use a saline (salt-water) nasal spray as often as**



possible. Saline can be bought at a pharmacy (eg. Ocean spray, Salinex, or Ayr). If you have an old spray bottle, you can mix your own solution with 1 teaspoon of salt dissolved in 1 cup of warm water. This moisture will help rejuvenate the lining of the nose and reduce the crusting that may develop in the areas of surgery. An antibiotic ointment (e.g. Bacitracin) or Vaseline can be applied with a Q-tip within the nostril twice a day for the first week.

- **DO NOT SMOKE!** This activity delays healing and adds to nasal crusting.
- Discuss with your doctor how long you should avoid strenuous physical activities and when you might be able to return to work. It is helpful if you can describe the nature of your work activities.

- If you have questions or are having trouble with any of the following, **call the Alliance office (401) 331-9690**
 - a) excessive bleedingd) a fever over 100 degrees
 - b) persistent nausea or vomiting e) uncontrolled pain
 - c) a rash or itchinessf) a displaced packing or splint