

Document Type: Postoperative Instructions
NASAL, SEPTAL, AND SINUS SURGERY



Bleeding: Minor bleeding is common during the first 24 hours after surgery. Nasal secretions are usually increased for the first 3 to 5 days. Secretions will start out somewhat bloody, but this will clear over a few days. A gauze pad may be taped under the nose to decrease the need for constant nose wiping. Heavy lifting or exercise may cause bleeding. Avoid heavy exercise for 10 days, or until directed by your doctor. Avoid bending over. Light physical activity and walking should not cause problems. Avoid aspirin, ibuprofen, or medicines that contain these (Alka Seltzer, Advil, or Motrin products), as these medications can cause prolonged bleeding. Bleeding should not be so heavy as to cause an active dripping from the nose. If heavier bleeding does occur, we recommend using Afrin (12 hour) nasal spray, 2 sprays into each affected nostril, every fifteen minutes until bleeding stops. If bleeding has not stopped or slowed down substantially after 20 to 30 minutes, you should call the office or the doctor on call (nights and weekends).

Pain: Pain medication will be prescribed, and is usually quite effective for these types of operations. Very mild pain may be controlled with Tylenol (acetaminophen) alone. Do not combine Tylenol with your prescription medication unless specifically instructed to do so by your doctor. Most of the prescription pain medications contain Tylenol (acetaminophen) along with the narcotic. Taking extra Tylenol in addition to the prescription pain medication may lead to an overdose, possibly causing damage to the liver. Night time pain can be reduced by keeping your head elevated and using extra pillows.

Nasal Congestion: Nasal congestion (blocked up nose) is very common following nasal surgery. This is generally from a combination of swollen tissues, clotted blood, splints, or packing material in the nose. Unfortunately, there is often little that can be done to alleviate this until splints, packing, or clotted blood are removed at your postoperative appointment. Sometimes dried blood will build up around the nostrils. This should be gently cleaned with hydrogen peroxide and a cotton swab (Q-tip).

Nasal saline spray is recommended during the first week to help prevent excessive buildup of dried blood or secretions.

Vaseline or antibiotic ointment applied inside the nostrils two to three times daily may also help to minimize buildup and irritation. **Avoid nose blowing** until your doctor says it is OK, as this can cause bleeding.

Miscellaneous: Plastic **nasal splints** may be left inside the nose during surgery. They are usually sutured in place. Don't try to remove them. It is almost impossible for them to fall out on their own. If you must **sneeze**, do so with your mouth open, to avoid disrupting blood clots or healing tissues. **Numbness of the front teeth and roof of the mouth** is very common after nasal septal surgery. This usually resolves in 2 to 3 weeks. **Decreased sense of smell or taste** is common and usually temporary, due to tissue swelling or clotted blood in the nose. **Nausea** is not common, but can occur because of medications or blood in the stomach. Medication to help the nausea can be prescribed by your doctor if needed. If you develop **swelling around the eyes, bruising around the eyes, or decreased vision**, you should notify the doctor **immediately**. If you develop **fever above 101 F, with neck stiffness and headache**, notify the doctor **immediately**.

If you have questions or concerns, please contact your doctor.

ARC ENT Locations

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ARC Far West Medical Tower | 6811 Austin Center Boulevard, Suite 300 | Austin, Texas 78731 | 512-346-8888

ARC Kyle Plum Creek | 4100 Everett, Suite 400 | Kyle, Texas 78640 | 512-295-1333

ARC Round Rock | 940 Hesters Crossing Road | Round Rock, Texas 78681 | 512-244-9024

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