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**Post-Operative Endoscopic Sinus Surgery Instructions**

Sinuses are natural air filled cavities in the face and skull. Sinusitis is inflammation or infection within the sinuses. Functional Endoscopic Sinus Surgery is a minimally invasive procedure that utilizes a thin telescope and small instruments through the nasal cavity. The purpose of sinus surgery is to drain the sinuses, remove tissue, and restore normal ventilation. A telescope is used through the nose to enlarge the natural but obstructed openings by removing small bits of tissue and bone. The sinuses are sometimes irrigated and occasionally small absorbable packs are placed.

**General Instructions**

- Following Endoscopic Sinus Surgery (an operation to enlarge the sinus openings), absorbable or dissolvable packing may be placed inside the nose or sinus, which may need to be removed at your first post-operative visit. Do not remove any packing on your own. Do not worry if prior to the first visit, pieces of the nasal packing fall out. This may appear to be dark mucous covered material.
- Following surgery your nose will feel stuffy. This is related to the swelling of the mucous membranes in your nose or sinus. As the swelling decreases, so will the feeling of nasal stuffiness. This may last 1-2 weeks. Keep your head elevated as often as possible to decrease the sensation of stuffiness.
- It is normal to have some bloody or mucous drainage from the nose; this will gradually decrease over the first few weeks after surgery. The drainage may be any of a variety of colors or consistencies. Call our office if there is any bright red bleeding, vomiting of blood clots, or sneezing out bright red blood for a prolonged period of time.
- A mustache dressing may be used to collect the drainage from the nose. You may change the dressing as needed. You no longer have to use the dressing when the nasal drainage stops.
- Keep the front of the nose lubricated with an antibiotic ointment such as Bacitracin or Polysporin. Apply with a Q-tip to the front of the nose to the depth of the head of the Q-tip once or twice a day.
- Lightly blowing the nose is allowed. Avoid vigorous blowing for the first 1-2 weeks as heavy blowing of the nose places too much pressure on the surgical site and may cause bleeding.
- If you need to sneeze, try to sneeze through the mouth instead of the nose.
- No strenuous activity such as team sports or physical education class for a full fourteen days after surgery unless we advise you to do so. Avoid bending over or

heavy lifting for at least the first week following surgery. You may discuss resuming light activities at your follow up appointment with us.

## **Medications**

- Normal saline nasal sprays or saline contact lens wetting solution can be used to moisturize and irrigate the nasal passages. Administer 1-2 sprays/squirts to each nostril 3 to 4 times daily.
- Over the counter sprays oxymetazoline (Afrin®, Dristan®, Genasal®) or prescriptions sprays such as Astepro, Patanase, Nasonex, or Veramyst may be used. Specific instructions for spray medicine will be given to you to reduce the amount of bloody discharge and congestion.
- Antibiotics may be prescribed and specific instructions for use will be given to you.
- DO NOT take any ibuprofen or aspirin based products after surgery unless advised by the physician, as they increase your risk for excessive bleeding. Tylenol for pain or fever is acceptable.
- A low-grade temperature is considered normal following surgery. To manage a postoperative temperature drink a lot of fluid and acetaminophen (Tylenol) is acceptable. If your temperature remains above 101.5 F despite these measures, please call our office.

## **Nasal Irrigations**

- You may be instructed to begin nasal saline irrigations. This is a very important part of the recovery process. You may start nasal irrigations on the day after surgery. Nasal saline helps to decrease the crusting retained in the nasal cavity, making the healing process smoother.
- Irrigations may be performed with a bulb syringe or other commercially available systems used to clear an infant's nose, and may be purchased at the drug store.
- You can either make your own nasal saline irrigation or purchase an already made solution. Several over the counter preparations are available such as Ocean Mist®, Ayr® pump spray or a high quality saline contact lens wetting solution such as Bausch & Lomb® can be purchased to irrigate the nose. Contact lens saline solution is buffered salt water made gently for the eyes, so it is less irritating and can be used safely in the nose.
- The following recipe will assist you with making your own nasal saline irrigation solution:
  - **Makes 1 pint:**
  - Ingredients: 1 pint clean warm (not hot) water, 1 teaspoon baking soda, 1 teaspoon non-iodized table salt.

- Mix the ingredients together and store in an air tight container. You may save the mixture for up to one week.
- You should irrigate the nose by filling the bulb syringe with the saline, and leaning over the sink with the head forward, gently flush the nasal cavity. Administer 1-2 sprays/squirts to each nostril 3 to 4 times daily. Keep the head forward to keep the fluids from running down the throat.
- DO NOT use contact lens CLEANING solution in the nose.

### **Postoperative Appointment**

- Your child needs an appointment 7 to 10 days following surgery. At this appointment, we may need to clean or suction your child's nose.
- There will be several post-operative phone calls made by our staff to you after the surgery with specific questions about your child's recovery. It is very important that our office has your current phone numbers.

### **Warning Signs**

- Fever above 101.5 degrees
- Worsening headache, nausea, or vomiting
- Changes in vision
- Persistent clear fluid draining from the nose
- Neck Stiffness
- Excessive bleeding from the mouth or nose
- If your child displays one or more of these warning signs, call the office immediately at the following:  
(904) 398-5437 Monday through Thursday, 8:00 AM - 5:00 PM/ Friday 8:00AM-4:00 PM.  
(904) 398-5437 on weekends, holidays and evenings. You may need to call the emergency room.
- Please call us at anytime if you have any questions.

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