



BRUCE R. MADDERN, M.D., P.A.
A Division of Florida Pediatric Associates, LLC
Pediatric Otolaryngology • Head & Neck Surgery

Name: _____

Date: _____

DOB: _____

ADENOTONSILLECTOMY (ADENOIDECTOMY AND/OR TONSILLECTOMY)

We have discussed the role of tonsils and/or adenoids in recurring upper respiratory infection (pharyngotonsillitis, sinusitis), nasal obstruction and snoring. Obstructive sleep apnea syndrome (breathing pauses during sleep) may be a consequence of enlarged adenoids and/or tonsils. These difficulties may be relieved by removal of the tonsils and/or adenoids. I understand, however, that there may be multiple causes for these difficulties that require additional evaluation or treatment.

We have discussed the potential risks, benefits (above), and alternatives to the procedure. Risks include but are not limited to the anesthetic, bleeding, sore throat, difficulty swallowing, dental and mucosal trauma, voice change, recurrent illness and the possible need for additional treatment or surgery. Alternatives include but are not limited to medical therapy and observation.

I understand that adenoidectomy and/or tonsillectomy by any technique does not remove all existing tissue and that there remains a possibility of regrowth of either the adenoids or tonsils.

We have discussed common peri-operative issues, including pain, fever, halitosis (bad breath), and recommended diet and activity restrictions. I understand the importance of maintaining adequate oral intake, nutrition, and pain control. All questions have all been answered to my satisfaction and understanding.

Parent/Guardian

Specializing in the Care of Children with Ear, Nose & Throat Disorders
10475 Centurion Parkway N., Suite 302 • Jacksonville, FL 32256
(904) 398-KIDS (5437) • (904) 398-3077 (FAX) • www.entforkids.com