

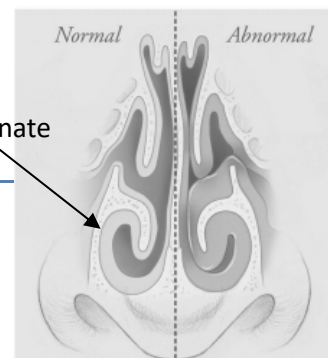


Bilateral Inferior Turbinate Reduction (BRIT)

Post-operative instructions

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Inferior Turbinate



The nasal turbinates are the primary controller of nasal airflow. We have three turbinates on each side wall of our nose. The inferior turbinate is the largest of the turbinates and plays the most significant role in normal nasal respiratory function. Its roles include cleaning, humidifying and the warming air before it gets to your lungs. Nasal obstruction from hypertrophy (enlargement) is a common problem, and when more conservative treatments fail (nasal steroids, allergy management, saline rinses, etc.) turbinate surgery may be considered. Most often, turbinate reduction surgery is performed in conjunction with septoplasty, or other nasal surgeries (like adenoidectomy). The goal of turbinate reduction surgery is to improve your sense of airflow through your nose.

After turbinate surgery, there may be crusting in the nose for 2-6 weeks. During this time, we suggest you use some form of nasal saline spray or irrigation once or twice daily.

Depending on your situation, there may be packing placed in your nose for a couple of days after the surgery. This is a temporary procedure, as the nasal cycle continues over the years, occasionally nasal congestion may recur from recurrent turbinate enlargement.

General Instructions

Following surgery most kids will take 1-2 weeks to fully recover. Pain following the surgery is often mild. Some children complain of a stinging sensation in the nose. They may return to school/daycare when they are eating and drinking normally and off all pain medications. Drinking fluids and proper nutrition are very important to ensure healing. You must drink to avoid dehydration. Some may experience nose bleeds following the procedure. Keep a gauze under the nose to catch any drainage. You can use Afrin nasal decongestant for a few days to help reduce bleeding. If the bleeding is constant call our office or go to the ER for evaluation.

Who to call?

Please direct all questions and concerns related to your child's surgery to our office (904) 398-5437

Pain Control

A mild-moderate amount of discomfort is to be expected after surgery. Children should be given Acetaminophen (Tylenol ®) and Ibuprofen (Advil® or Motrin®) alternating every 3 hours as needed after surgery.

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