



TONSILLECTOMY/ADENOIDECTOMY INSTRUCTION SHEET

DIET- During the first few days after the operation, you/your child may not want to eat or drink very much. Most foods can be eaten safely during this time. The exceptions are foods that may scratch you/your child's throat. In general, juices contain acids that will burn, so liquids such as Gatorade and Kool-Aid are better. Some patients do not eat much for as long as two weeks after surgery. This is all right as long as enough liquids are taken in. A good rule of thumb is enough liquids to keep the patients urine clear. This should be about 30 ounces for each 10 pounds of weight. Most patients can eat a variety of things after tonsillectomy. Soft foods or foods which can be easily chewed are the best foods to offer, but you should offer your child foods that they.

ACTIVITY- Any strenuous activity should be avoided for 2 weeks after tonsillectomy. Strenuous activity that raises your blood pressure may cause bleeding to occur. PE and sports in general should not be engaged in for 2 weeks, or when your doctor releases you/your child.

WHAT TO EXPECT- COMMON PROBLEMS

BLEEDING- Which can occur in about 3% of tonsillectomies, usually happens between the seventh and tenth days after the surgery. Sometimes, this bleeding is only a small amount and stops quickly. This bleeding is not a problem. Bleeding that lasts for more than 30 minutes should be reported to your doctor. Severe bleeding may also occur if a large blood vessel bleeds. If the amount of bleeding is large, or seems like too much, you/your child may have to return to the hospital to have the bleeding cauterized.

PAIN- Your doctor should have prescribed pain medication for you. Most of the pain medicines used after surgery contains narcotics. While narcotics are very effective in controlling pain, they also have some side effects that limit their effectiveness. Nausea is a common side effect of narcotics. Some medicines, Mepergan for example, contain Phenergan which is used to control nausea. If you experience excessive nausea, you may want to try using Tylenol only for pain. Do not take aspirin-containing medicine, or Motrin, Advil or similar pain medicines as they may increase bleeding. If you cannot control your pain, **CALL YOUR DOCTOR!**

NAUSEA AND VOMITING- For the first twenty-four hours after your procedure, you/your child will be recovering from general anesthesia. The most common problem that is encountered is nausea and vomiting. This is caused by a number of factors; the anesthetics used, swallowed blood, and narcotics in the pain medicine that is being used. Avoiding narcotic pain medicines, especially in young children, during this time will reduce the nausea and vomiting. If your physician has prescribed Phenergan for you/your child, you should use this if you have problems. If you/your child has had problems with nausea after a general anesthetic in the past, you may wish to use the Phenergan during this time to prevent nausea. If you cannot control the nausea or vomiting, you should **CALL YOUR DOCTOR!**

FEVER- Another problem that can occur in the immediate post-operative period is fever. Most children and some adults will run a fever of up to 102 degrees after a tonsillectomy. This post-op fever may last as long as a week or more. Fever that is higher than 102 degrees may be a sign of a serious problem such as pneumonia. Any fever higher than 102 degrees should be reported to your doctor or if after hours, to the doctor on call. Everyone has a different reaction to this procedure, but if you/your child develop a fever along with a cough, chills, severe neck pain, or sudden change in behavior, you should call the doctor. If you are running a temperature above 102 degrees, you should **CALL YOUR DOCTOR!**

MY CHILD IS NOT GETTING BETTER!-For most patients, the pain, fever, and effects of the surgery will worsen from the second to the fifth day. A symptom peculiar to this operation is ear pain that occurs on or about the fifth day. This symptom usually lasts about 24 to 36 hours. This pain is not due to any problem with you/your child's ears, but is referred from you/your child's tonsils. This is probably the result of the "scabs" beginning to pull away from the tissue. During this time, additional pain medicine may be needed, but it is normal.

You/your child will return to our office between two and three weeks after the surgery. If all has gone according to plan, you will be released to normal activity. If you have any problems or questions at any time, please call us at: