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# Post-operative Instructions Following Septoplasty

## General:

Septoplasty is performed as an outpatient procedure. If you have other medical conditions such as sleep apnea, you may spend one night in the hospital or surgery center after your procedure. You will have absorbable sutures placed to close the incision in the septum. Often, splints are placed to help with healing and minimize scar tissue formation. The nose may be congested or obstructed in the first few to several days following septoplasty. This is relieved with saline rinses (see Nasal Care following the Surgery below). Mild oozing of blood from the nose and down into the back of the throat is expected in the first 48 hours.

## Diet:

You may have liquids by mouth once you have awakened from anesthesia. If you tolerate the liquids without significant nausea or vomiting then you may take solid foods without restrictions. If nausea is persistent, an anti-nausea medication may be prescribed for you. Some patients experience a mild sore throat for 2-3 days following the procedure. This usually does not interfere with swallowing.

## Pain control:

Patients report moderate nasal pain, upper dental pain, congestion and headache for a few to several days following septoplasty. This is usually well controlled with over-the-counter ibuprofen (Advil, Motrin) and acetaminophen (Tylenol). Ibuprofen dosage can be increased to 800mg every 6 hours for up to 4 days if you do not have a history of kidney disease, stomach ulcers or gastritis. If over-the-counter medications do not control the pain please take the prescribed oral pain medication. Keep in mind the prescription pain medication does contain an opioid that can cause sedation, intoxication and constipation. All opioid containing medications have addiction potential. Please contact our office (602) 258-9859 if your pain is not controlled with your prescription pain medication.

## Activity:

No heavy lifting or straining for 2 weeks following the surgery. You should plan for 1 week away from work. If your job requires manual labor, lifting or straining then you should be out of work for 2 weeks or limited to light duty until the 2 week mark. Walking and other light activities are encouraged after the first 24 hours.

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### **Nasal care following the surgery:**

A folded 2 inch x 2 inch gauze nasal drip pad may be worn under the nose (taped to the cheeks) to catch any oozing of blood during the first 48 hours. Change this as needed when it is saturated. The drip pad does not need to be worn if the nose is not actively dripping. Rinse the nose 3-5 times daily with saline solution beginning the day after surgery. This can be accomplished with a Neil-Med Sinus Rinse bottle (available over-the-counter at most pharmacies). Gently apply a thin layer of petroleum jelly (Aquaphor, Vaseline) or antibiotic ointment (Neosporin, Polysporin) to the nostrils twice daily for the first week. Hot steam showers as needed are very helpful in relieving nasal congestion and crusting. Sleep with the head elevated for the first 48 hours; this will minimize pain and congestion. You may use two pillows to do this or sleep in a reclining chair. Your doctor may have you spray your nose with decongestant spray (Afrin) as needed for persistent nasal congestion and oozing. Do not use Afrin spray for longer than 3 days.

### **Follow-up appointment:**

Your follow up appointment in the office will be 5-8 days following your surgery. At this visit, relief from nasal congestion occurs as the septal splints are typically removed at that time. This visit should be scheduled prior to your surgery (at the time of your pre-operative visit). If you do not have the appointment made, please contact our office when you arrive home from the surgery center.

### **Please call our office immediately if you experience:**

- \*Brisk nose bleeding
- \*Fever greater than 101 degrees Fahrenheit
- \*Purulent discharge (pus) coming from the nose
- \*Severe nasal pain or headache

Call 911 for severe bleeding or difficulty breathing

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