

Outpatient Discharge Instructions Tonsillectomy & Adenoidectomy

1. GENERAL ANESTHESIA OR SEDATION

Occasionally can cause patients to be groggy and/or nauseated lasting up to about 24 hours.

If nausea and vomiting occur, this can be improved by taking the Phenergan prescribed by Dr. Frost. (This can be taken either by mouth or as a suppository if the patient is too nauseated to keep the medicine down.) Once again, although it is unlikely, swallowed blood can cause nausea as well which is usually not controlled by Phenergan, and if the material vomited up contains a large amount of blood or clots, this should be treated as postoperative bleeding.

Do not drive or operate machinery for 24 hours from discharge.

Do not consume alcohol, tranquilizers, sleeping medications, or any non-prescribed medication for 36 hours.

Do not make important decisions or sign any important papers in the next 36 hours.

2. ACTIVITY

The patient should rest at home for the first week. They may return to school/work after the first week if they feel up to it, but they may continue to have a sore throat for up to 2 weeks. Patients should avoid physical exertion for 10 days until the throat heals, and the risk of bleeding is completely passed.

3. FLUIDS AND DIET

It is very important to drink adequate liquids both to make sure they stay hydrated and because it will make the throat feel better. Swallowing is most painful at first when the patient has not swallowed for a long time, but the more they drink the easier and less uncomfortable it will become, so it is important to keep drinking frequently. It may also be helpful to wake the patient up once or twice the first night to let them drink some liquids. Cold, non-carbonated beverages are usually best such as Kool-aid, Gatorade, Iced tea, Apple juice, Water, Ice chips, Jello and Popsicles. Patients should drink at least 3 large glasses of liquid per day. Another way you can tell if the patient is getting enough to drink is by the color of their urine. The urine should be clear. If the urine is dark orange, it is too concentrated, and they need to drink more. If patients absolutely refuse to drink enough liquid, we can bring them back to the hospital and place an IV to administer fluids as needed, but this is rarely needed. Soft, smooth foods like pudding, mashed potatoes or ground meat, etc., are best for the first 10 days as they are less likely to scratch the throat. Patients may not feel like eating much solid food for the first few days, and it is not unusual for patients to lose a few pounds after surgery. This is OK, but once again, it is mandatory that patients drink an adequate amount of fluid. Dairy foods may thicken the saliva and may be difficult to eat the first 24 hours, but are OK if they can be swallowed.

4. MEDICATIONS

Dr. Frost has prescribed a pain medication that contains narcotics. This is a very potent pain medication and will help the throat pain substantially, but it can also cause nausea if a high dose is taken or if the patient is up moving around too much after taking the medication. For this reason, if the patient is having enough pain to require this medication, they should probably be at bed rest too, or at least not active. Changing the patient over to plain Tylenol when the level of pain has subsided will allow the patient to feel better and more alert in most cases. Under no circumstances are you to use Advil, Aspirin, Motrin, Aleve or any other non-steroidal anti-inflammatory medication. This kind of medication reduces the ability for the blood to clot and increases the risk of a post-operative tonsil bleeding.

Dr. Frost has prescribed an antibiotic to take for the first 10 days after surgery. This medication will help the throat to heal somewhat faster.

5. OPERATIVE SITE

After surgery, you can expect a sore throat for about 10-14 days. Although the discomfort usually improves over the first few days, many patients notice that it actually seems a little worse around days 5-7. This is due to the healing process, and it should not be cause for alarm, as it will continue to improve after this. There is frequently pain in the ears. This is really just pain in the throat that feels like it is in the ears. The throat will have a thick white coating where the tonsils used to be. This is the normal healing process and does not indicate infection. There may also be bad breath until the throat is completely healed at about 2 weeks.

The patient will usually have small amounts of blood or blood-tinged secretions from the mouth or nose for the first 24 hours. This is normal and should not cause alarm. Substantial bleeding is uncommon, but if it is going to occur, it usually takes place either the first night after surgery or about 7-8 days after surgery when the scabs come off of the throat. A significant amount of bleeding would be bleeding that is continuous or that fills up more than an inch of the bottom of a glass. Likewise if the patient vomits up a comparable amount of blood clots it indicates the patient is swallowing this amount of blood. If this amount of bleeding occurs, you should contact Dr. Frost or the Emergency Room immediately so we can assess the seriousness of the situation and decide if the patient needs to return to the hospital.

- Follow up appointment: Call Dr. Frost's office for scheduled appointment. Resume medications unless otherwise instructed by your physician.
- If you have specific questions regarding your discharge instructions, contact Southern New Mexico Surgery Center between the hours of 0800 am - 0500 pm, Monday through Thursday @ (575) 437-0890 and ask to speak to nurse.
- If you have questions or problems with your prescriptions or surgical procedure, please call the physician office at (575) 437-4533.
- After hour care is handled by the physician office @ (575) 437-4533. One of our doctors is on call 24 hours a day. If you have an emergency or need immediate medical treatment, go to the emergency room or call 911.

I have read/been read the instructions and understand them. A copy has been given to me.

Patient / Guardian Signature

Nurse Signature