

Division of Pediatric Otolaryngology Scott M. Rickert MD, Acting Director 160 East 32nd Street, New York, NY 10016 212-263-0922 (office) / 646-501-5298 (fax)

TONSILLECTOMY AND TONSILLECTOMY/ADENOIDECTOMY POST-OP INSTRUCTIONS

What should be expected following a tonsillectomy or tonsillectomy and adenoidectomy?

1. After the procedure, the patient may experience moderate to severe throat and/or ear pain. This pain typically lasts 1-2 weeks long.

To help alleviate this pain:

- Regular doses of the pain medication (Tylenol with codeine) prescribed by your doctor should be given every four hours while the patient is awake. This should be continued for the first five to seven days. Your child may need prescription pain medicine for seven to ten days. This is completely normal.
- Please <u>do not use</u> **Motrin or Advil (Ibuprofen) products** after tonsillectomy for at least two weeks unless specifically instructed by your surgeon.
- The use of cool compresses and ice collars on the neck, ice chips or constant sipping of fluids may also help decrease throat pain.
- 2. Your child may lack energy and/or act listless for several days following the surgery. The third day may be the worst.
- 3. Drink a lot of fluids; such as water, apple juice, Gatorade™, Pedialyte™ or powdered juice mixes. Jello™ and popsicles are also good sources of fluids (no red please). Avoid acidic juices like orange juice as they can cause discomfort.
- 4. Your child should rest at home for the first few days. Strenuous activity, rigorous play or contact sports should be avoided for two weeks. If the patient attends school, he/she can return to school seven days after surgery, but should not participate in gym class or recess for two weeks.
- 5. Bad breath is expected and may last for ten to fourteen days following the procedure.
- 6. White patches will appear as your throat heals. This is normal post-operative healing.
- 7. Some nausea and vomiting may occur following surgery. If severe, anti-nausea suppositories can be prescribed to help treat nausea if necessary.
- 8. At around day 7-10, there may be another dip in activity. This is when the healing scabs fall off the surface. At this point, the healing area is more sensitive to discomfort and more vulnerable to the risk of potential post-operative bleeding. If there are any questions, please contact the office.
- 9. We strongly recommend that your child stay in the local area for a minimum of two weeks after surgery due to the small but important risk of bleeding.
- 10. If there are any issues whatsoever, a post-operative appointment is recommended.

What are some reasons you should contact your doctor after surgery?

1. Fever between 99 – 101 F degrees may be noted for the first three to four days following the procedure. If your child has a fever over 102° F or the fever is not controlled with Tylenol, please contact your doctor.

- 2. Nausea and vomiting may be noted after the procedure, but if the nausea or vomiting becomes persistent, interfering with fluid intake, or blood is noted in the emesis (vomit), please contact the office.
- 3. Any bright red bleeding seen from the mouth or nose should be reported to your doctor immediately. If bleeding is noted, rinsing or gargling with ice water will help slow or stop it while you are calling the doctor.
- 4. Although there is no absolute diet restriction, hard and crunchy foods (tacos, pizza crusts, pretzels, chips, etc.) may irritate the healing surface. Most children do well with a soft diet but can resume a normal diet two weeks after surgery.
- 5. Call if you have any questions or concerns.