

CARE AFTER
TONSILLECTOMY AND ADENOIDECTOMY (T&A)

GENERAL INFORMATION:

Tonsillectomy and Adenoidectomy are surgical procedures to remove the tonsils from the sides of the throat, and the adenoids (also called the adenoid pad), at the back of the nose, on the back wall of the throat.

INSTRUCTIONS FOR HOME:

Expectations: The patient has had major surgery and will be experiencing the following for up to two weeks after the surgery:

- Ear and throat pain—due to the tonsils and adenoids healing.
- Stiff neck—usually mild and lasts for a few days. If severe and associated with inability to move the neck, call us.
- Foul smell to the breath
- Nasal discharge
- Fever—if this is very high (greater than 102.5°F) or is associated with rapid or labored breathing while awake, call us.
- Snoring, mouthbreathing, or nasal congestion—may last for several weeks.
- Mild cough
- Change in voice quality
- Difficulty swallowing

The white scabs in the throat are part of the normal healing process. Night awakenings due to pain are common. Using the pain medications as prescribed, around the clock when awake for the first 5-7 days, will help the patient have less pain. The pain can last as long as 10 days after surgery. If this occurs, do not be afraid to continue the pain medicine.

ANY BLEEDING FROM THE NOSE OR MOUTH IS ABNORMAL—CALL US IMMEDIATELY: 362--9730

Diet: On the night of surgery limit the patient to a light diet to help prevent vomiting after the surgery. The patient does not need to eat or drink until the next day. If desired, soups, Jell-O, juices, and popsicles are allowed. No heavy foods, including milk, should be eaten on the evening of surgery. On the day after surgery, the patient may eat anything he or she wants, as long as the stomach has settled.

Some children after tonsillectomy and adenoidectomy will refuse to eat or drink. If this is severe enough, the child could become dehydrated. Signs of dehydration are: a low grade temperature, dark “straw” colored urine, little or no urine output, dry cracked lips, sunken eyes, and absence of tears when crying. Call our office if your child experiences these symptoms and you are concerned.

Activity: Normal activities may be resumed as tolerated. School physical education and other sports may be resumed at the parents’ discretion, unless otherwise instructed by the surgeon.

Medications: An antibiotic may be prescribed upon discharge from the hospital. It should be started the day after surgery. Please finish the entire prescription as directed.

The pain medication(s) prescribed should be taken every 4-6 hours around the clock when awake for the first 5-7 days while awake. After that, use pain medications *as needed* for pain.

Over the counter decongestants may be used for nasal stuffiness if needed.

DO NOT USE ASPIRIN OR IBUPROFEN PRODUCTS SUCH AS ASPERGUM, ALEVE, MOTRIN, OR ADVIL AS THEY CAN CONTRIBUTE TO BLEEDING. AVOID SUCH HERBALS AS GINSENG, GINGKO, OR GARLIC SUPPLEMENTS.

Follow-up: The patient has been scheduled for follow-up in our office 4-6 weeks after the surgery. The post-operative appointment is written on your pre-operative scheduling sheet.

If you have any questions, problems, or need to schedule (or re-schedule) an appointment, please contact our office at **362-9730**.