



YOUR POST-OPERATIVE APPOINTMENT IS SCHEDULED FOR

_____ with Dr. _____

it is essential to keep your post-op appointment, if this date and time is not convenient, please call our office to reschedule. (617) 524-3864

**Post Operative Instructions
Functional Endoscopic Sinus Surgery (FESS)**

DIET

- Patients who have received general anesthesia may experience nausea and occasionally, vomiting. It is therefore preferable to eat a bland light meal or a liquid diet on the first day after the surgery. Regular diet may be resumed the next day.

PAIN

- You may take Tylenol or pain medication that your doctor has prescribed as needed.
- Do not use any aspirin or aspirin products, Advil, Aleve, Ibuprofen, Motrin or Motrin type products for two weeks before and two weeks after surgery. These medications may increase the risk of bleeding.

WOUND CARE

- In most cases, intranasal packing is not utilized. You may have a small amount of bleeding on the day of surgery. This gradually slows down over the first 72 hours, and almost always subsides spontaneously.
- It is common to experience nasal obstruction following surgery, similar to having a head cold. This is due to swelling within the nasal passages. You may also notice drainage from the nose, which may be thick, dark or blood-tinged.
- Please refrain from blowing your nose. This can lead to bleeding and may affect the outcome of your surgery. Instead, spritz with saline (Ocean) spray when you feel congested.
- Avoid smoke and other substances, which might irritate the nose.
- If you sneeze, keep your mouth open. Do not close mouth and sneeze.

ACTIVITY

- Elevate the head as much as possible. Sit in a recliner or use two or three pillows when sleeping. Head elevation reduces swelling.
- Avoid strenuous activity or exercise for at least 1 – 2 weeks after surgery. Do not lift anything over 10 lbs.
- Post-operative visits are an important part of your care to promote healing. You will typically be seen once a week for 2-3 weeks after the surgery and may be seen one month after your last weekly visit. During these visits, your nose will be examined and removal of crusts and debris may be necessary.

MEDICATIONS

- Use a nasal saline irrigation several times daily. You may use pre-mixed packets purchased over the counter or the attached recipe.

- Antibiotics and/or steroids may be prescribed. Please take them as directed until they are all gone.
- You may take pain medication as needed. Pain medications cause drowsiness, somnolence, nausea and constipation. Please refrain from driving, operating machinery or making important decisions when taking painkillers.
- Pain pills may cause nausea if taken on an empty stomach. It is preferable to take those pills with a piece of toast or some food.
- Avoid herbal supplements which contain Ginko biloba, garlic, ginseng, flaxseed oil or Vitamin E.

WHEN TO CALL YOUR DOCTOR

- Fever of 101.5° F or greater, persistent clear watery drainage from the nose, changes in vision, eye swelling, severe headache, or neck stiffness

Should you have any questions or problems following your procedure which have not been covered in this information sheet, please feel free to call the office between the hours of 9AM and 5PM and we will be happy to answer your questions.

INSTRUCTIONS FOR NASAL SALINE IRRIGATIONS

2 tsp. sea salt/pickling salt
(can be obtained from grocery store)

1/2 Tsp. baking soda

1 quart water

Boil water and add salt and soda. Allow to cool to room temperature. Divide into three (3) equal portions and use to irrigate. To be used (3) times a day. Mix a new batch each day.

Use a rubber bulb syringe to irrigate. You will be able to find a bulb syringe at most any pharmacy.

When irrigating, lean forward over sink, and use enough force to cleanse the nose and sinuses. We rely on the mechanical action of the water to remove blood clots, crusting and debris to help in the healing process. You should aim toward the back of your head, as well as the top of the back of your head when irrigating your nose. You should irrigate for at least three weeks postoperatively, although some people find that irrigating on a regular basis indefinitely is very helpful in preventing sinus infections.

Some important information about narcotic medications:

NARCOTICS (OPIOIDS)

Frequently after surgery you may be prescribed a narcotic pain medication, also known as opioid medications. Tylenol #3 (Tylenol [or acetaminophen] with codeine), Vicodin (Tylenol with hydrocodone), and Percocet (or its liquid form, Roxicet which are Tylenol and oxycodone) are commonly given for procedures where pain may not be easily controlled with Tylenol alone. As these above listed pain medications include acetaminophen (Tylenol) as well, it is notable that you should not be taking additional Tylenol on top of these medications. (Acetaminophen not to exceed 3000 mg daily for adults or 10 mg/kg per 4 hours in children, 15 mg/kg per 6 hours in children).

Common side effects of narcotics include:

- Sedation- because these medications can make you drowsy, do not operate heavy machinery nor drive while taking them. Also, do not make important decisions after anesthesia nor while on these medications.
- Nausea- try to take a little bit of food (even a tablespoon or two of applesauce; something simple) before the narcotic, to prevent nausea. Also, use the least amount that is effective to avoid additional adverse side effects. If taking the narcotic you are still very nauseous or vomiting, call the office to obtain anti-nausea medication or to be switched to a different pain medication.
- Constipation- for some people, narcotics can cause significant constipation. Taking an over the counter stool softener, such as Colace or Dulcolax can be helpful in preventing this, or consider adjusting your diet (e.g. adding prunes/juice/fiber) while taking them to avoid/alleviate this problem. Call the office if this is a problem despite these suggestions.
- Itchiness- unless you have a rash (which would indicate potential allergic reaction) this is seen in association with a histamine release noted by some patients when taking narcotics. An antihistamine such as Claritin (loratadine), Zyrtec (ceterizine) or Benadryl can generally alleviate this.

When taken as prescribed, narcotic pain medications can manage pain safely and effectively. But taking medication that is not prescribed for you, taking more pills than have been prescribed, taking too many prescription narcotics at once, or taking them in ways other than prescribed can have short-term and long-term harmful effects on the brain and body, including serious medical complications, addiction, brain damage, overdose and death.

Disposal of Unused Prescription Drugs:

- Bring unused medications to secure medication drop-off boxes around the state. To find a drop box in your area, visit www.mass.gov/DrugDropbox
- Do not flush medication down the drain unless the label or accompanying patient information specifically instructs you to do so
- If you throw medication in the garbage, remove the medicine from its container, crush the pills and mix them with coffee grounds or kitty litter. Place the mixture in an unmarked container, like an empty can or sealable bag, and throw the container in the trash.