

**EAR, NOSE & THROAT SPECIALISTS  
OF SOUTHERN NEW HAMPSHIRE, P.A.**  
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***Post Operative Surgical Instructions***  
***ADENOIDECTOMY***

**Background Information:**

The adenoids, or pharyngeal tonsils are an accumulation of lymph tissue located in the back of the nose (nasopharynx) close to the eustachian tube opening.

Enlargement of the adenoids with nasal obstruction could result in mouth breathing, snoring, hyponasal speech, sleep disturbance and purulent nasal discharge. Nasal airway obstruction, ear infections (otitis media) or chronic adenoiditis (infection) are indications for an adenoidectomy. Removal of the adenoids is performed under general anesthesia. It is an outpatient surgical procedure.

The purpose of an adenoidectomy is to try to increase the airway, reduce the frequency of ear infections or eliminate a source of chronic infection.

**Please refer to your separate pre-operative surgical instruction sheet for all the instructions you must follow before the surgery.**

**Common Post-Operative Complaints:**

1. Mild sore throat for 1 week
2. General malaise for several hours
3. Occasional episodes of vomiting
4. Low grade fever (100° - 101°) up to one week
5. Increased nasal stuffiness due to increased nasal secretions and intranasal swelling—secretions may be slightly blood-tinged.
6. Possible foul odor to the breath (usually around the 5th day as the protective membrane over the area of the excision begins to deteriorate)

### Post-Operative Instructions

1. **DO NOT BLOW the nose for at least 4 days** (sniffing and wiping is allowed)
2. Return to school 5 days after surgery.  
Avoid athletics and other activities that elevate the heart rate for at least a week. Students should not participate in gym classes until they have been checked post-operatively in the office.
3. DIET: **Encourage clear fluids** (water, ginger ale, popsicles, clear soups & juices...). Progress to a normal diet when the patient appears ready.
4. Take all medications as ordered--*even if you are feeling better* (Tylenol, antibiotic, ...)

Call the office at 622-3623 if the following occurs:

1. Persistent episodes of vomiting
2. Development of bleeding:
  - A) If the patient develops brisk, bright bleeding (like a fresh nosebleed), call the office or go to the emergency room
  - B) If you develop mild, bloody dripping:
    - First, spray each nostril 2 times with 12 hr. Afrin or Neosynephrine decongestant nasal spray. Have the patient help to draw the spray deep into the nose by sniffing back
    - Wait 20 minutes with the head elevated.
    - After waiting 20 minutes (by the clock), tilt head forward over a tissue and monitor for active dripping. If active dripping persists, call the office.
3. If the patient is not already on an antibiotic, call the office if the patient experiences one or all of the following:
  - A) Increased fever -- greater than 101° despite the use of Tylenol
  - B) Increased foul odor to the breath
  - C) Increased pain
  - D) Patient is lethargic (unusual lack of energy)