

**EAR, NOSE & THROAT SPECIALISTS
OF SOUTHERN NEW HAMPSHIRE, P.A.**
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Post-Operative Instruction **ENDOSCOPIC SINUS SURGERY**

Background Information:

Endoscopic Sinus surgery is designed to improve the health of the nasal sinuses by removing sinus disease. The doctor can explore your ethmoid and frontal sinuses by passing a rigid fiberoptic telescope through the nose allowing for direct visualization of the ethmoid and frontal sinuses. Specialized instruments designed to remove sinus disease are passed into the nose alongside the scope.

Normal ethmoid and frontal sinuses are air filled chambers. They form an irregular honeycomb structure of paper-thin bone. Sinuses constantly circulate air and produce mucus that is swept out through the sinus openings by tiny brushlike structures called cilia. The ethmoid sinuses are located between the eyes, while the frontal sinuses are located behind the eyebrows.

The intersection of your frontal, ethmoid and maxillary sinuses is called the middle meatus. Any blockage of this area from a deviated septum, mucosal swelling or sinus disease can interfere with normal sinus drainage. To help correct your sinus problems, Endoscopic Ethmoidectomy surgery may be combined with a Septoplasty and Turbinate procedures.

All endoscopic sinus surgery is performed under general anesthesia on an outpatient basis at one of the local hospitals or a surgery center.

- **Please refer to your separate pre-operative surgical instruction sheet for all directions before the surgery.** •

Common Post-Operative Complaints:

1. Increased nasal discharge that may be slightly bloody. It may start as an active bloody drip from the nose that slowly changes to a thicker blood-tinged mucus. This should resolve in approximately 24 hours.
2. Increased nasal congestion
3. Mild to moderate pain/discomfort
4. Temporary loss of taste and smell
5. Low grade fever up to 101°

Post-Operative Instructions:

1. Rest quietly for 24 hours—the more active you are, the more your nose will drip. After 24 hours increase your activity to a moderate level. Avoid jogging, aerobics, athletics or lifting anything over 20 lbs. for at least one week.
2. Change your nasal drip pad as needed. Always use three 2" x 2" gauze squares folded in half lengthwise to make a new drip pad. Discard your nasal dressing when your drainage has subsided.
3. **Do not blow your nose** until you return to the office for your first post-operative visit. You will be advised at that time when you can blow your nose.
4. Sneeze with your mouth open.
5. Diet – Start with clear liquids and progress to a normal diet as you feel ready
6. Liberally mist saline spray (e.g. Ocean) into each nostril 4-6 times per day to alleviate crusting. Start this on the first day after surgery and continue doing it daily for several weeks.
7. Apply antibiotic ointment (i.e. Bacitracin) twice a day for 1 week. Use a Q-Tip to apply the ointment inside each nostril.

Nasal Packing: Nasal packing in the form of a small sponge (Merocel pack) **OR** a dissolvable packing (Merigel) will be inserted into the sinuses. Merocel packs will be removed in the office 2-4 days after surgery. Merigel will slowly dissolve but residual pieces may be gently suctioned at your first postoperative appointment.

Nasal Irrigation: The process of cleansing the sinuses after pack removal will be accomplished by very liberal use of saline spray or by the Water Pik/bulb syringe method. Your physician will determine the best method of irrigation for you. If it is determined that you need to irrigate, the office nurse will instruct you on how to prepare the Buffered Hypertonic Saline Solution. **DO NOT START** irrigations with the Water Pik or bulb syringe until instructed to do so. Only use the saline (Ocean) spray unless instructed otherwise.

Follow-up Exams/Insurance Issues: It may take 4-6 weeks for complete healing and recovery of the sinuses. Regular follow-up visits may require endoscopic examinations of your sinuses. If your insurance plan requires authorizations/referrals from your primary care doctor to see a specialist, it is your responsibility to obtain referrals for all of your post-operative endoscopies as they are not covered by your original surgery authorization. Call your PCP ahead to have a few endoscopic exams authorized and a referral mailed/faxed to our office.

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

1. Active nasal bleeding—tilt your head forward—monitor for continuous drip
2. Visual Disturbance – blurring, double vision, severe pressure behind the eye
3. Fever greater than 101° after taking Tylenol
4. Persistent nausea and vomiting
5. Severe neck stiffness with associated fever and headache
6. Excessive drowsiness or confusion.

Our office nurse will call your home after surgery to answer any of your questions and go over any specific instructions. She will also schedule a follow-up visit in approximately 7 days. It is recommended that you remain out of work until after your follow-up exam.