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Tonsillectomy and Adenoidectomy Information Form

Risks of Surgery (brief summary)

There is up to a 3% risk of bleeding after Tonsillectomy or Adenoidectomy. This often occurs 7-14 days after the surgery. You should go to the nearest emergency department if this occurs.

With an adenoidectomy there is a chance that your child will have a hyper-nasal voice following surgery temporarily.

Tonsillectomy and Adenoidectomy can be quite painful. Pain medication will be given for after the operation.

Before the operation:

2 weeks before the operation you should not take any ASA. Non-steroidal anti-inflammatory medications such as Motrin, Ibuprofen (Advil), Naproxen or any medications containing these drugs can be taken up to five days preoperatively. Celebrex and Mobicox may be taken up to the day prior to surgery. All herbal medications should also be avoided as they can interfere with normal blood clotting and anesthetic agents. If you take pills for high blood pressure, you should still take them the morning of surgery with sips of water. One of the risks of the surgery is post-operative bleeding which will be less likely if these instructions are adhered to. There are many new blood thinners now being used which each have a different duration of effect. Please make certain you review this with the office, so you are only off them the appropriate amount of time.

Patients will attend a pre-operative tour at the hospital where blood work and pre-operative testing will be done if any has been ordered. If this is not attended and we are unable to contact you to confirm that you are still going ahead with your surgery, it will be cancelled.

Patients having this operation with symptoms of sleep apnea (the cessation of breathing during sleep) may be staying overnight after the operation as there is a greater chance of apnea after an anesthetic. This will allow monitoring to ensure adequate oxygenation after surgery.

After the Operation:

After the tonsillectomy, there can be significant discomfort. Diet should start with non-acidic liquids and soft foods. Freezies, pudding, popsicles, Sorbet are good items to start with. As the throat heals the pain will reduce and the diet should be advanced accordingly. **AT NO TIME SHOULD ASPIRIN BE TAKEN 2 WEEKS BEFORE OR AFTER SURGERY.**

The first 2 nightø pain medication should be given every 4 hours. This may require you to wake up your child to give them their pain medication. They should also be encouraged to drink at this time. If they refuse to take medication by mouth, suppositories of Tylenol can also be used. If you have been given a prescription for Morphine, this should be taken with Tylenol, or Advil, and given at the same time. Some children have abdominal discomfort with Morphine, and it may need to be stopped if not well tolerated. I recommend starting with the Advil for pain control. If more medication is required sooner than 4 hours, it is safe to give Tylenol in between doses of Advil. Use the Morphine if needed. Adults are generally given Percocet and Tylenol # 3 for pain management. Celebrex, an anti-inflammatory may also be provided to help reduce the need for narcotic medications after surgery. As pain decreases, narcotic medications should be discontinued using only Advil or Tylenol as needed. Adults are often prescribed a steroid, Dexamethasone to be taken if pain is not adequately managed with prescribed pain medication. This will act to reduce the post op swelling and can be quite effective to reduce post op pain.

Occasionally antibiotics are prescribed for adults undergoing tonsillectomy. These can generally be taken as a liquid or a pill depending upon what your preference is. Let the Pharmacist know what you prefer.

The pain is generally worse the first day following the surgery. Each person recovers differently from this surgery. Some children will take up to 3 weeks to fully recover while others are up and feeling well after 5-7 days. Ear pain is quite normal 5 days after surgery. This is referred pain from the throat. If the child is doing well and their pain begins to get worse 7-8 days after surgery, you should contact the office.

If there is any BLEEDING after surgery, you should bring your child (or yourself) to the closest emergency department.

Snoring often stops 7-21 days after the surgery in children who are having the operation for snoring with sleep apnea.

Return to school is 7 days after surgery if the patient is doing well. Heavy lifting and strenuous physical activity should be avoided for at least 10 and preferably 14 days after surgery.

Follow up with Dr. Robichaud is only if needed. If you have any concerns please contact the office, by phone, or email, and an appointment can be made as needed.

