

ADULT AND PAEDIATRIC ENT HEARING AND BALANCE SPECIALIST

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POST OPERATIVE PROTOCOL OPERATION: ADENOIDECTOMY

- **HOSPITAL STAY:** Generally you will be discharged the same day as the procedure but on occasion an overnight stay may be required.
- **PAIN:** Adenoidectomy is not particularly painful. Children may complain of throat or ear pain and may require relief. Your doctor will advise which analgesia is best for you/your child.
 - Paracetamol can be taken every 4-6hours up to a maximum of 4 times a day
 - Oxynorm may also be taken in addition to Paracetamol but may cause nausea and constipation.
 - Painstop – (Paracetamol/Codeine) may be given if your child doesn't have a history of Obstructive Sleep Apnoea.
- **BLEEDING:** Bleeding is possible up to about a week after the operation. It is extremely uncommon but may be present as bleeding from the nose or the mouth. Should this occur for more than 5-10 minutes at a time, we recommend you notify us and present to emergency.
- **BAD SMELL:** Sometimes there may be a bad smell coming from the nose. This is normal and due to the slough at the operative site and old blood in the nose. Using FESS nasal spray will alleviate this symptom.
- **FATIGUE:** Your child may feel fatigue following the general anaesthetic. Children may need one week off school following the adenoidectomy.
- **NAUSEA & VOMITING:** Please notify the anaesthetist if you or an immediate family member have experienced significant anaesthetic-related nausea and vomiting in the past.
- Very rarely there may be regurgitation of food and/or water from the nose in the post-operative period. This is because the palate may not be closing against the nose. This will in majority of cases resolve on its own as the tissue heals. However please notify your surgeon if this should occur.
- **POST OP REVIEW:** You will need to see your surgeon 4-6 weeks after surgery.

Please call the rooms if you have any questions after surgery.