

# Tonsillectomy and Adenoidectomy

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## What is a tonsillectomy?

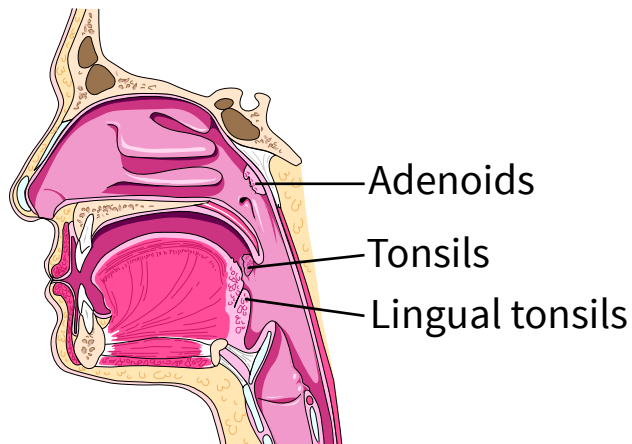
- A tonsillectomy is surgery to take out your tonsils. Your tonsils are on the sides of your throat.

## What is a lingual tonsillectomy?

- This is surgery to take out your lingual tonsils. Your lingual tonsils are at the back of your tongue.

## What is an adenoidectomy?

- An adenoidectomy is surgery to take out your adenoids. Your adenoids are at the back of your nose. They are removed through your mouth.



# Why do I need this surgery?

## Tonsillectomy

- You may have a tonsillectomy to treat tonsillitis (repeated tonsil infections).
- Tonsillitis can make your tonsils swollen, which can make it hard to breathe.
  - › This is often worse at night.
  - › This can cause **obstructive sleep apnea** (when you have pauses in your breathing while asleep).

## Lingual tonsillectomy

- You may have a lingual tonsillectomy to treat enlarged lingual tonsils.
- Enlarged lingual tonsils can cause obstructive sleep apnea.

## Adenoidectomy

You may have an adenoidectomy to treat enlarged adenoids. Enlarged adenoids can cause:

- Obstructive sleep apnea
  - › Trouble breathing through your nose, which can cause obstructive sleep apnea
- Repeated ear infections
  - › These infections can cause a chronic (ongoing) plugged feeling in your ears (called Eustachian tube dysfunction)

- Your surgeon may take out only your tonsils, or both your tonsils and your adenoids. They will talk with you about what is right for you.
- Most tonsillectomies and adenoidectomies are done as day surgery. This means you can go home on the same day as your surgery.
- You will likely stay in the hospital for at least 1 day if you:
  - › Have moderate (bad) to severe (very bad) obstructive sleep apnea, so that we can monitor your sleep apnea
  - › Live far away from the hospital

## **How do I get ready for this surgery?**

**You must have a responsible adult:**

- › **stay in the hospital during your surgery.**
- › **take you home after your surgery.**
- › **stay with you for 24 hours (1 day) after your surgery.**

**If this is not possible, call your surgeon before your surgery.**

Before your surgery, make sure you have:

- Acetaminophen (Tylenol®) to take for pain while you recover
- Lots of fluids, like:
  - › Milkshakes
  - › Juice
  - › Soup
  - › Gatorade® or Powerade®
  - › Water

## **Before your surgery**

### **Your surgery date**

- Your surgeon's office will call you with a surgery date and time. If you do not hear from them, please call your surgeon's office.

**If you cannot keep your appointment, please call your surgeon's office as soon as you can to let them know.**

- You may need to have tests before your surgery. This will depend on:
  - › your general health.
  - › the type of surgery you are having.

Staff will contact you to make appointments for these tests, if needed.

## Medication

- If you are taking any medications (including prescription and over-the-counter medications, inhalers, creams, eye drops, patches, herbal medications, vitamins, and supplements), tell your surgeon before your surgery.
- Your surgeon will tell you:
  - › which medications you can take before your surgery.
  - › when you can take your medications, including on the day of your surgery.
  - › if you can take your medications with water before your surgery.
  - › which medications you should stop taking before your surgery and when you should stop taking them.
- It is best to stop taking any herbal medications, vitamins, or supplements 14 days (2 weeks) before your surgery. Some of these medications may cause more bleeding.

**Do not take these medications for 7 days (1 week) before your surgery:**

- › ASA (Aspirin®)
- › Ibuprofen (Advil®, Motrin®)

## The day before your surgery

- Do not eat anything after midnight the night before your surgery.

## The day of your surgery

- You may drink clear liquids up until 3 hours before your surgery, unless told otherwise by your surgeon. Clear liquids include:
  - › Water
  - › Juice **without pulp** (like apple or cranberry juice). **Do not** drink orange juice.
  - › Sports drinks (like Gatorade® or Powerade®)
  - › Coffee or black tea **without milk or cream**
- You may take your medications as told by your surgeon with sips of water.
- You may brush your teeth.
- If you have long hair, please tie it back.
- If you have facial hair, please shave before you come to the hospital.
- **Do not** use scented products. Nova Scotia Health is scent-free.
- Take off all make-up and jewelry before coming to the hospital.
- Bring a container for the ride home, in case you need to vomit (throw up).

## **Bring these things to the hospital:**

- All of your medications in their original containers, including:
  - › Prescription medications
  - › Drops
  - › Puffers or inhalers
  - › Patches
  - › Injections
  - › Creams or ointments
  - › Over-the-counter medications
- Your provincial health card
- CPAP machine, if you use one

## **Valuables**

- **Do not** wear any jewelry or bring any valuables (like money, credit cards, cheque books) with you to the hospital.
- The hospital is not responsible for the loss of any item.

## **Parking**

- Be sure that you have enough time to park before your appointment.
- Parking at the hospital may be limited.



**It is very important to be on time for your surgery. Your surgery may be cancelled if you are late.**

**If you have a fever (temperature above 38 °C or 100.4 °F), a cold, or flu symptoms, call your surgeon's office before coming to the hospital. Your surgery may need to be rescheduled.**

## **Delays**

- Delays in the O.R. may cause a change in your surgery time.
- There is a chance that your surgery may be cancelled because of an emergency. If this happens, your surgeon's office will call you to book a new date.

## **What will happen when I get to the hospital?**

- You will register and get an identification (I.D.) bracelet. Staff will put your I.D. bracelet on your wrist.
- A staff member will help you get ready for surgery. They will ask you to change into a hospital gown and put your belongings into a plastic bag. You will get your belongings back after your surgery.

- A nurse will:
  - › Check your vital signs (blood pressure, pulse, breathing, temperature, and oxygen levels)
  - › Talk with you about how long your surgery will take, what to expect in the recovery room, and your care at home
- You will wait in the waiting room until the nurse calls you.
- You will meet with the surgeon and anesthesiologist (doctor who puts you to sleep for surgery). This is the time to ask any questions you may have.
- You will have general anesthetic (medication to put you to sleep) for this surgery.

## **After surgery**

- You will wake up in the Post-Anesthetic Care Unit (PACU). Most patients recover from their anesthetic in this area. When you are ready, you will go back to Day Surgery.

- The nurses in the PACU will closely monitor your:
  - › vital signs. You may get oxygen through nose prongs or a face mask, if needed.
  - › intravenous (I.V.) tube. This is used to give you fluids. It will be taken out when you can drink and are not feeling nauseous (sick to your stomach).
  - › pain. They will give you pain medication as needed.
- You may have an ice pack to help with discomfort.
- Your nurse may bring you some ice chips or ice water. **It is important to start drinking soon after surgery, even if your throat feels sore.** If you do not drink, your throat will hurt more and swell, and may start to bleed.
- You may be asked to rinse your mouth when you go back to Day Surgery. **Do not** gargle.
- **It is important to talk, but not a lot.** Talking uses your throat muscles so they do not get stiff, but talking too much can strain your throat muscles and make your sore throat worse. Remember to rest when you can.

- **Do not:**
  - › cough or clear your throat with a lot of force.
  - › gargle.
  - › spit.
  - › suck on hard candies. This may lead to choking.
  - › suck on throat lozenges (cough drops). The ingredients in throat lozenges can irritate your throat.
- Throat sprays (like Chloraseptic®) can help.
  - › Follow the directions on the package.
  - › **Do not** use more than directed. This can lead to choking.
- A nurse will help you get up for the first time after your surgery. **Do not** get up by yourself. You may still be drowsy.
- **Do not** smoke. Smoking slows your healing.

## Care at home

### For 24 hours after your surgery:

- › **Do not** drive a car or use heavy machinery.
- › **Do not** drink alcohol.
- › **Do not** sign any legal documents or important papers.
- › **Do not** care for others (including children).

- **You must have a responsible adult stay with you for 24 hours after your surgery.**
- It will take about 2 weeks to heal from your surgery. Good pain control, drinking lots of fluids, and getting enough rest will help you heal as fast as possible.

## Pain

- Your throat and ears may be sore after surgery. The pain may get worse until about 3 to 5 days after your surgery. This is common.
- Taking the right amount of pain medication at regular times will help you manage your pain. **This is important for healing.**

- Follow your surgeon's orders about what medications to take for pain. Check the amount of medication carefully. Your pain will get better about 7 to 10 days after your surgery.
- **Do not** drink alcohol while taking pain medication.
- Your surgeon may give you a prescription for pain medication.
- You may also take Tylenol®. Follow the package instructions for how much to take.
  - › Taking Tylenol® regularly will help your prescription pain medication work better. You may also need less prescription pain medication.
  - › **Do not** take more than 4 grams (4000 mg) of Tylenol® in 1 day.
- **Do not take ASA or acetylsalicylic acid (Aspirin®), ibuprofen (Advil®), or similar medications. If you have bleeding after surgery, these medications may make bleeding worse.**
- Take your pain medications regularly. This is very important for the first 3 to 5 days after your surgery. **Do not** wait until your pain is very bad before taking your pain medication. It often takes 30 minutes for the medication to start working.

- Pain medications will not take away all of your pain, but they will lower it.
- If your pain medication makes you feel nauseous, you may take Gravol™. You may wish to take Gravol™ 30 minutes before taking your prescription pain medication.
- If you have an itchy rash, an antihistamine (like Benadryl®, Claritin®, Reactine®, or Alerius®) can help. Follow the package instructions for how much to take.
  - › It is best to take Benadryl® in the evening or at night, as it may make you drowsy.
- To help constipation (not being able to poop), you can drink prune juice, eat dates, or use an over-the-counter medication (like Senokot® or RestoraLAX®).
- If you have a lot of side effects from your prescription pain medications, you may want to take a lower dose (amount). Talk with your pharmacist about this, if needed.
- **Do not** change your dose before talking to your pharmacist.

## Drinking and eating

- Drink as much fluid as you can (at least 2 to 3 litres a day). **It is important to do this, even if you feel some pain or discomfort.** It may help to take small sips.
- It is OK if you do not eat solid food for a few days, as long as you are drinking fluids. Fluids include:
  - › Smoothies
  - › Popsicles®
  - › Freezies
  - › Yogurt
  - › Pudding
  - › Jell-O®
  - › Ice cream
  - › Soup
- You may eat any food that:
  - › is comfortable for you to swallow.
  - › does not have sharp edges. Sharp edges on foods can catch on your incisions (cuts) and cause them to start bleeding.
- Add to your meals slowly over time. Try to add soft foods like mashed potatoes, macaroni and cheese, and eggs.
- Chew all foods well before you swallow. Taking sips of water with your food may help you to swallow it more easily.



## **Do not eat:**

- › Toast and other dry foods
- › Crusty breads
- › Potato chips
- › Nacho chips
- › Popcorn
- › Spicy foods
- › Food and drinks that are at a very hot temperature
- › Raw fruits and vegetables
- › Citrus juices (like orange juice)

## **Activity**

- Get enough rest.

## **If you had your adenoids removed:**

- 24 hours after your surgery, you may start rinsing your nose with salt water. This helps to prevent infection.
- **Do not** drive a car for 48 hours (2 days) after your surgery.
- **Do not** take a long trip unless you have talked about it with your surgeon.
- **Do not** use your voice loudly for 72 hours (3 days) (like cheering at a sports event).
- **Do not** sing loudly.

## **For 14 days after your surgery, do not:**

- › forcefully cough or clear your throat.
- › gargle.
- › eat foods hot enough to cause discomfort in your mouth.
- › drink alcohol.
- › smoke.
- › do any vigorous (hard) exercise or sports, or dancing.

## **Bleeding**

- You may have bleeding after your surgery.
- A scab may come off your incision about 7 days after your surgery. This is common. This may cause a little bleeding. You may see a very small amount of fresh, red blood in your mouth or nose.
- You may see a white or grey covering in your throat where your tonsils were. This is common while you are healing. It should go away over time. It is **not** a sign of infection.

## **Going back to work**

- Your surgeon will talk with you about when you can go back to work or school. Most people take at least 1 to 2 weeks.

**Call 911 or go to the nearest Emergency Department right away if:**

- › you have bleeding that does not stop.
- › you spit up more than a teaspoon of fresh blood.

**Tell your primary health care provider (family doctor or nurse practitioner) as soon as you can if you have:**

- › A fever (temperature above 38 °C or 100.4 °F)
- › Pain that does not go away even after taking pain medication

## **Follow-up**

- You will have a follow-up appointment with your surgeon 4 to 6 weeks after your surgery.

**What are your questions?**

**Please ask a member of your health care team. We are here to help you.**

# Notes:

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This pamphlet is for educational purposes only. It is not intended to replace the advice or professional judgment of a health care provider. The information may not apply to all situations. If you have any questions, please ask your health care provider.

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