

## Endoscopic Sinus Surgery

### Valley Regional Hospital

My surgery is on:

Date: \_\_\_\_\_

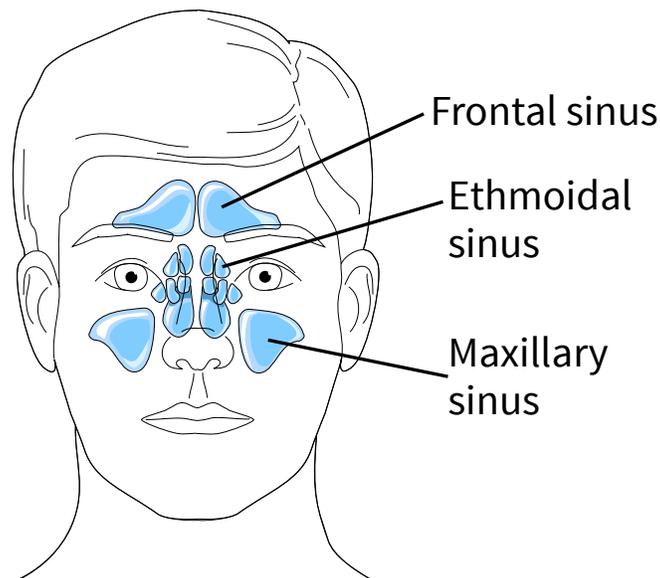
Time: \_\_\_\_\_

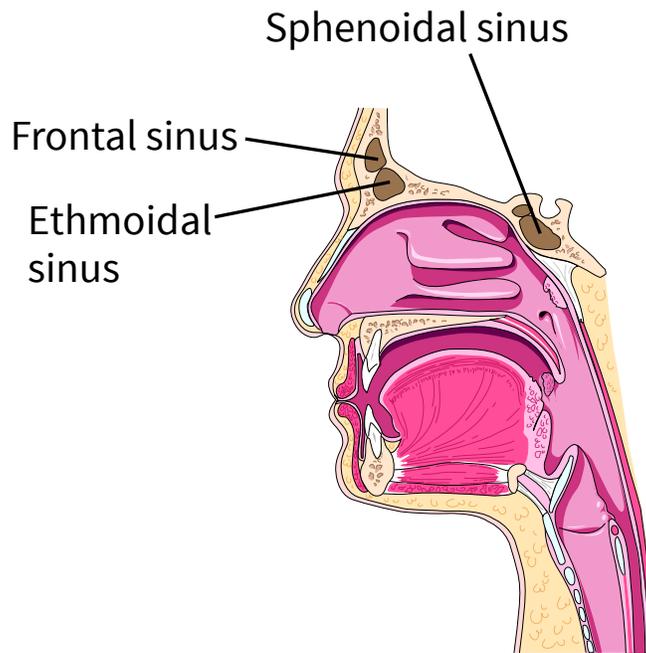
# Endoscopic Sinus Surgery

- The sinuses are cavities (spaces) in the bones of your face and head. The lining in the sinuses releases mucus.
- Your sinuses can get inflamed (red and swollen). This can lead to a nasal blockage, a loss of smell, and sometimes pain. You may need surgery if medical treatment does not help.

## What is endoscopic sinus surgery?

- Endoscopic sinus surgery removes polyps (tissue growths) and mucus or pus. This makes room in the sinuses so they can drain properly.
  - › A nasal polypectomy is a type of endoscopic sinus surgery that removes polyps (tissue growths) that may affect your breathing from your nose.
- Endoscopic sinus surgery may also be needed to remove masses (lumps) or tumours in the nose and/or sinuses.





## Getting ready for surgery

- You may need tests before your surgery. This will depend on your general health and the type of surgery you are having. Staff will contact you to arrange for testing before surgery, if needed.
- **Plan to have a responsible adult drive you home and stay with you the first 48 hours (2 days) after your surgery.** This is for your safety.
- If you take medication, please talk with your surgeon before your surgery. They will tell you which medications to take before your surgery with a sip of water, and which ones to stop taking.
- Stock up on fluids like water, juice, Gatorade® or Powerade®, milkshakes, and soups.
- Have acetaminophen (Tylenol®) on hand.

## Medications



### For 14 days (2 weeks) before your surgery:

- **Do not** take any natural or herbal medications or products. These may cause more bleeding.

### For 10 days before your surgery:

- **Do not** take ASA (acetylsalicylic acid, Aspirin®).

### For 7 days (1 week) before your surgery:

- **Do not** take ibuprofen (Advil®, Motrin®).
- Stop taking ASA (acetylsalicylic acid), like Aspirin®, and any medications that have ASA. If you are not sure, ask your nurse or surgeon.

It is OK to take acetaminophen (Tylenol®).

- You may be prescribed an oral (by mouth) steroid to take for 7 days before your surgery. Start taking the medication 6 days before your surgery. Continue taking it each day so that the final dose is taken the morning of your surgery. Take it with a tiny sip of water.

## The night before your surgery

- **Do not eat or drink anything after midnight the night before surgery.**



## The morning of your surgery

- You may take your medications as told by your surgeon with sips of water.
- You may brush your teeth.
- Follow any directions you were given at the Pre-Admissions Clinic (if you had an appointment there).
- Take off all make-up and jewelry before coming to the hospital.
- If you have long hair, pull it back with an elastic.
- We recommend that your face is clean shaven.
- Nova Scotia Health is smoke-free and scent-free. Please respect this policy. **Do not** use scented products (like perfume, after shave, scented hair spray).

## **Tell your surgeon if you:**

- › Become sick (have diarrhea [loose, watery poop], vomiting [throwing up], nausea [upset stomach]) before your surgery
  - › Have a cough, cold, or fever (temperature above 38 °C or 100.4 °F)
- 
- Give yourself plenty of time to find parking.

## **Bring with you on the day of your surgery:**

- Provincial health (MSI) card
- Private medical insurance card (if you have one)
- All of your medications (including prescription and over-the-counter products, inhalers, creams, eye drops, patches, herbal products, vitamins, and supplements) in their original containers
- CPAP machine (if you use one)
- A container or bag for the ride home in case you vomit

## **My appointment**

- **Your surgery may be cancelled if you are late.**
- **If you are not able to keep your appointment, call the booking office as soon as possible:**
  - › Phone: 902-679-2657, extension 2401
- Arrive 2 hours before your scheduled surgery time or at the time your surgeon's office told you.
  - › If your surgery is scheduled for 8 a.m., please arrive by 6:15 a.m.
- **Go through the main entrance and register at Central Registration.**
- Delays in the O.R. may cause a change in your surgery time. There is a chance that your surgery may be cancelled if there is an emergency. If this happens, your surgeon's office will call you to arrange a new date.

## What will happen after surgery?

### Right after surgery:

- You may have packing in your nose. If you do, you will only be able to breathe through your mouth.
  - › This packing is usually dissolvable (goes away on its own). You can wash it out with saline (salt water) 2 to 3 days after your surgery.
  - › If the packing is not dissolvable, it is usually removed 2 to 7 days after surgery.
- You will be taken to the recovery room, where a nurse will check the back of your throat.
- You may have swallowed blood during and after your surgery. You may vomit old blood.
- If you have nausea, ask your nurse for medication.
- You may have a headache or pain in your nose. Your doctor will order pain medication that can be given every 4 hours. Ask your nurse for medication, if needed.
- You may have an ice pack to help with discomfort.
- Your intravenous (I.V.) will be taken out when you are drinking well and do not have an upset stomach.
- **Do not** get up for the first time on your own. Ring for the nurse to help you. You may still be drowsy.
- The packing is usually taken out before you leave the hospital, or up to 7 days after your surgery. You will be asked to rest for 30 minutes (half an hour) after the packing is taken out.
- You will have spaces for stents in your nose. They may be tied together with string to the tip of your nose. They will be removed about 2 weeks after surgery.
- You may be prescribed an antibiotic if you have a stent or an infection after surgery. Take the antibiotic for 2 weeks.
- You may have a prescription for pain medication after surgery if you have packing.

## After you leave the hospital

### Safety

- You must have a responsible adult with you when you leave the hospital.  
**You cannot leave the hospital alone.**

### Discomfort

- **Unless your surgeon tells you it is OK, use caution or avoid taking:**

- › Acetylsalicylic acid, also called ASA (Aspirin®)
- › Ibuprofen (Advil®)
- › Medications that have ASA or ibuprofen

If you have bleeding after surgery, these medications may make it worse.

- You can buy Tylenol® or Tylenol® Extra Strength at your local drugstore without a prescription. Follow the package directions.
- Your doctor may give you a prescription for pain medication.
  - › **Do not** drink alcohol while taking pain medication (especially if you have packing).



### For 2 days after your surgery:

- **Do not** drive a car.



### For 7 to 10 days after surgery, avoid:

- › Injury to your nose
  - › Straining while going to the bathroom (pooping) (ask your doctor about stool softeners, if needed)
  - › Violent sneezing or coughing (sneeze or cough with your mouth open instead)
  - › Blowing your nose
  - › Picking your nose
  - › Overheating (like sunbathing or hot baths)
  - › Strenuous (hard) work
  - › Sex
- Talk with your surgeon at your follow-up visit about when you can go back to these activities.

## To help with your recovery:

- One (1) day after your surgery, you can wash your nose out with saline (salt water). You can make your own or buy it at a local drugstore.
- Use the ointment, drops, or nasal spray you were given, as instructed.
  - › Use more ointment or drops if you have severe (very bad) crusting and blockage.
- You may have bad breath and a strange taste in your mouth. This is caused by bleeding, post-nasal discharge, and mouth breathing. It may help to brush your teeth and use mouthwash often.
- Get plenty of rest.
- Drink plenty of fluids.
- Sleep with your head raised up on pillows. This will help to lower swelling and help your breathing.

### **Call your primary health care provider (family doctor or nurse practitioner) if you have:**

- › An unusual amount of pain, swelling, or tenderness that does not go away even after taking pain medication
- › Fever (temperature above 38 °C or 100.4 °F)

**If you cannot reach them, go to the nearest Emergency Department right away.**

## Bleeding

- It is normal to have mild bleeding from your nose for 7 days.
- If you have mild bleeding:
  - › Sit comfortably and lean forward.
  - › Firmly squeeze your nostrils together. Hold for 3 to 5 minutes.
  - › It may also help to put a cold compress on your forehead.
- **To make a cold compress:**
  - › Fill a large bowl with ice cubes and cold water.
  - › Put a few clean facecloths in the bowl.
  - › Remove 1 facecloth from the bowl and squeeze out any extra water. Fold the facecloth and put it over the bridge of your nose for 20 minutes. Then replace it with a new facecloth from the bowl.
- **If the bleeding does not stop, call your primary health care provider or surgeon right away.**

## Possible complications

- A rare complication of this surgery is leaking fluid from around your brain through your nose.
  - › The fluid may be clear or it may be mixed with blood that tends to stay in the centre surrounded by clear fluid when dropped on a paper towel.
  - › There may be more drainage when you strain.
  - › This can happen for 1 to 4 weeks after surgery.

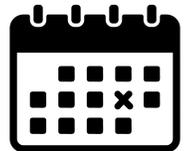
### Call your surgeon or go to the nearest Emergency Department right away if you have:

- › A salty taste
- › Headache which gets worse when you stand up
- › Double vision
- › Bulging of the eye

## After you leave the hospital

### Follow-up

- Starting the day after your surgery, use a nasal (nose) saline (salt water) rinse 3 times a day, and as needed. Do this until your follow-up appointment with your surgeon.
- You may have 1 or 2 stents in your nose. If you have 2 stents, they will be tied to the tip of your nose with a black string.
  - › **Do not** take these stents out. It is OK if they fall out on their own as this means there is a lot of room.
  - › Your surgeon will take the stents out at your follow-up appointment in 2 weeks. Keep all of your follow-up appointments.





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.

Find all patient education resources here:  
[www.nshealth.ca/patient-education-resources](http://www.nshealth.ca/patient-education-resources)

Connect with a registered nurse in Nova Scotia any time:  
Call 811 or visit: <https://811.novascotia.ca>

*Prepared by:* Otolaryngology, Head and Neck Surgery, Valley Regional Hospital  
*Illustration by:* LifeART Super Anatomy 1 Images, Copyright © 1994,  
TechPool Studios Corp. USA  
*Designed and Managed by:* Library Services

WV85-2603 © March 2026 Nova Scotia Health Authority  
To be reviewed March 2029 or sooner, if needed.  
Learn more: <https://library.nshealth.ca/patient-education-resources>

