Nose Surgery

Types of nose surgery

Nasal polypectomy
• Removes polyps (pale, grey swellings that make breathing harder)

Septoplasty
• Repairs a deviation of the nasal septum to relieve a nasal blockage (blocked nose) or improve sinus drainage

Septorhinoplasty
• Changes the shape of the nose for cosmetic reasons or to repair an injury
• You may need a plaster cast for about 7 days
Right after surgery

- You may have swallowed blood during and after your surgery. This may cause you to vomit (throw up) old blood. If you feel sick to your stomach, ask the nurse for medication.
- You will have bad breath and a taste in your mouth caused by bleeding, post-nasal discharge and mouth breathing. Brushing your teeth and using mouthwash will help.
- You might have packing in your nose. A small dressing under your nose called a “drip pad” or “moustache dressing” will be changed regularly.
- It is normal to have a little bit of blood on the drip pad.
- It is normal for your nose to be swollen.
- It is normal to have pain after surgery. The pain medication ordered by your doctor can be given to you every 4 hours.
- Ask your nurse for medication, if needed.
- You may apply an ice bag on your eyes to help with swelling and discomfort.
- Sleep with your head elevated (raised up) on pillows. This lowers swelling and helps you breathe easier.
• Your intravenous (IV) will be disconnected when you are drinking enough and not feeling sick to your stomach.

• Ring the call bell for the nurse to help you get up the first time. You may still be drowsy.

• If you have packing, it will be removed 24 to 48 hours (1 to 2 days) after your surgery. We will ask you to lie down for an hour after the packing is removed. You will be able to leave the hospital if there is no bleeding at that point.

• Apply Vaseline® ointment to both nostrils twice a day for the first week after surgery.

• Use saline (salt water) nasal spray 3 to 4 times a day for at least 1 week after surgery.

• If you have a nasal case, we will give you an appointment to have it removed, usually 1 week after surgery.

At home

Safety

• You must have a responsible adult take you home. You must not take a taxi or bus home alone.

• Ask your doctor when you can return to work or school.
Discomfort

• Do not take ASA, acetylsalicylic acid (Aspirin®), ibuprofen (Advil®), or similar medications.

• You may take Tylenol® according to the package directions, and your regular medications. Tylenol® will help your medications work and may lower the dose you need.

• Your doctor may give you a prescription for pain pills.

• Do not drink alcohol while taking pain pills.

For 2 days after surgery:
• Do not drive a car.

For 2 weeks after surgery:
• Do not lift more than 5 pounds.

• Avoid injury to your nose

• Avoid straining while going to the bathroom. Stool softeners may be helpful.

• Avoid violent sneezing. Sneeze or cough with your mouth open.

• Avoid blowing your nose (for 7 to 10 days after surgery).

• Avoid too much dryness.

• Avoid overheating (from sunbathing or hot baths).

• Avoid picking or rubbing your nose.
Tips:
• Apply Vaseline® ointment to both nostrils 2 times a day.
• Use more ointment if you have severe (very bad) crusting and a blockage.
• Only use nasal sprays if prescribed. Start using these gently the day after surgery, if recommended.
• Get plenty of rest.
• Drink plenty of fluids.

Contact your primary health care provider if you have:
› an unusual amount of pain or tenderness.
› high fever with a temperature above 38.5° C/101.3° F.

If you have slight bleeding from your nose, sit comfortably and lean forward. Firmly press both nostrils together and hold for 3 to 5 minutes. A cold compress over the forehead may help and feel good. 95% of nosebleeds can be controlled this way.

If bleeding does not stop, go to the nearest Emergency Department right away.
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