

Tonsillectomy and Adenoidectomy

Valley Regional Hospital

Your surgery will be at:

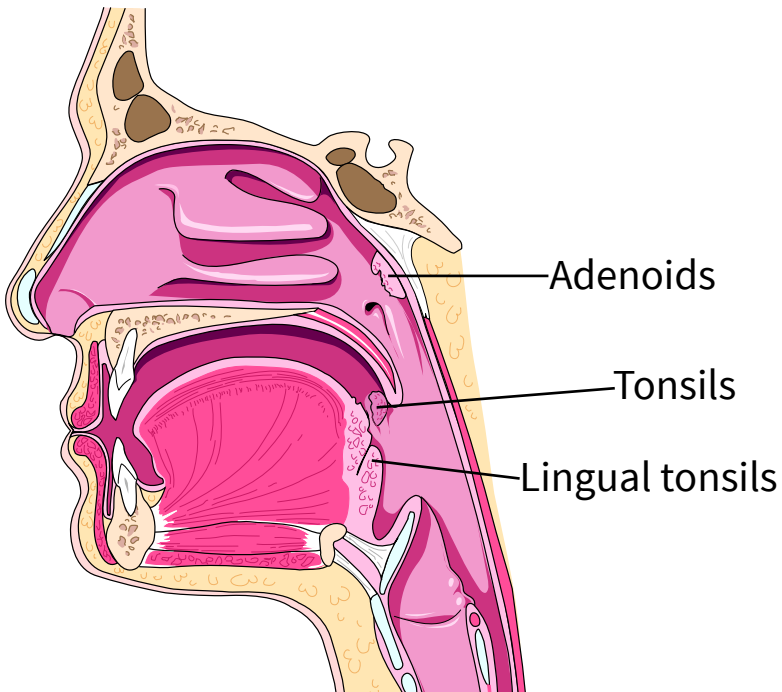
Date: _____

Time: _____

Tonsillectomy and Adenoidectomy

What is a tonsillectomy?

Having your tonsils taken out is called a tonsillectomy. The tonsils are on the sides of your throat. They are usually taken out if you have repeated infections called “tonsillitis”. The tonsils can get very swollen and make it hard to breathe, especially at night. This may cause symptoms of obstructive sleep apnea (pauses in breathing while sleeping).



What is an adenoidectomy?

Having your adenoids taken out is called an adenoidectomy. The adenoids are similar to the tonsils, but they are at the back of your nose. They are taken out through your mouth. Adenoids that are too large may cause obstructive sleep apnea (person stops breathing during sleep), trouble breathing through your nose, or repeated ear infections or a chronic (ongoing) plugged feeling in your ears (called Eustachian tube dysfunction).

What is a lingual tonsillectomy?

The lingual tonsils are similar to the tonsils at the back of your throat. However, they are at the back of your tongue. They may also cause symptoms of obstructive sleep apnea if they are too large.

Some people have only their tonsils taken out. Some have both their tonsils and adenoids taken out. Most surgeries are done as day surgery, meaning you can go home the same day as your surgery. However, if you have moderate to severe (very bad) obstructive sleep apnea, you will likely stay in the hospital for at least one day so that we can keep an eye on your sleep apnea. We may also keep you in the hospital if you live far away.

Welcome!

This guide will help you learn how to care for yourself safely before and after your tonsillectomy and adenoidectomy. This will be a day surgery, unless your surgeon tells you that you will have to stay overnight in the hospital.

As a **Day Surgery** patient you will:

- Come to the hospital on the day of your surgery.
- Have your surgery done in the Operating Room (OR).
- Return home after your surgery with a responsible adult who will take you home and help you, as needed.

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

Your surgery may be cancelled if you are late.

If you are not able to keep your appointment, contact your surgeon's office to let them know. There is space near the end of this guide to write down questions to ask your health care team.

Please come to the Same Day Surgery Unit:

Valley Regional Hospital, Victoria building, 10th floor

- **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 make sure you arrive by 6:15 a.m.
- Register at Central Registration at the main entrance.

Delays in the OR 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.

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 your testing before surgery, if needed.

Getting ready for surgery

Please bring with you on the day of surgery:

- Provincial health card
- Private medical insurance card (if you have one)
- All of your medications in their original containers (including puffers, patches, injections, creams, and over-the-counter or herbal preparations)
- CPAP machine (if you use one)

How do I get ready for surgery?

- Stock up on your favourite fluids. Examples include water, juice, Gatorade®/Powerade®, milkshakes, and soup.
- Have acetaminophen (Tylenol®) on hand at home.
- If you take medication(s), please talk with your surgeon before your surgery. They will tell you which medications you should take before surgery with a sip of water, and which ones you should stop taking before surgery.

What can I eat or drink before surgery?

- Do not eat or drink anything after midnight the night before surgery.
- You may take your medications as told by your health care provider with sips of water.
- You may brush your teeth.
- Follow any directions you were given at the Pre-Admissions Clinic (if you were seen at the Pre-Admissions Clinic).

Please remember to:

- Arrange for a ride home and for someone to stay with you the first night.
- Bring a container or bag for the ride home in case you are sick to your stomach.
- Take off all make-up and jewelry before coming to the hospital.
- If you have long hair, pull it back with an elastic. We also recommend that you are clean shaven.

- **Tell the surgeon if you:**
 - › become sick before surgery
 - › have a cough, cold, or fever
- Give yourself plenty of time to find parking.
- Nova Scotia Health Authority is smoke-free and scent-free. Please respect this policy. Do not put on a scented product, such as perfume, after shave, scented hair spray, etc.

Medications:

- Bring all of your medications in their original containers, including non-prescription drugs.
- It is best to stop all natural/herbal medicines 2 weeks before surgery, as some may cause more bleeding.
- Do not take ASA or acetylsalicylic acid (Aspirin®) for 10 days before surgery.
- Do not take ibuprofen (Advil®, Motrin®) for one week (7 days) before surgery.
- Acetaminophen (Tylenol®) is OK.

What will happen on the day of surgery?

- You will register and an identification (ID) bracelet will be put on your wrist.
- A staff member will help you get ready. You will be asked to change into a hospital gown. The staff member will take your belongings and place them in a plastic bag.
- A nurse will check your pulse, blood pressure, etc. and talk with you about the length of your surgery, time spent in the recovery room, and instructions for care at home. You will be asked to 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) before your surgery. This is the time to ask any questions you may have.
- The surgery will take about one hour.

After a general anesthetic (medication to put you to sleep for surgery):

- You must have a responsible adult drive you home.
- You must have a responsible adult who can look after you and stay with you for the first night.
- If you have questions or concerns about your anesthesia care, call _____.

What will happen right after surgery?

- You will wake up in the Post-Anesthetic Care Unit (PACU). Most patients recover from their anesthetic in this area.
- The nurses caring for you in the PACU will frequently check your:
 - › blood pressure and pulse
 - › breathing/possible need for oxygen
 - › intravenous (IV)
- The nurses will also check your level of discomfort/pain. They will give you pain medications as needed.
- You may be asked to rinse your mouth when you go back to Day Surgery. **Do not gargle.**

- 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 get swollen, and may start to bleed.
- **Use an ice pack to help with discomfort.**
- The intravenous (IV) will be taken out when you are drinking enough and not feeling sick to your stomach.
- It is important to talk, but not a lot. Talking uses your throat muscles so they do not get stiff. Too much talking can strain your throat muscles and make your sore throat worse.
- Try not to cough or strain, as this can raise the blood pressure in your head and increase the risk of bleeding.
- Swallow all of your saliva (spit). Taking frequent sips of cold water can help with this.
- Throat sprays such as Chloraseptic® can help. Be cautious of overuse of these sprays, as this may lead to choking.
- The nurse will help you up in PACU and Day Surgery for the first time, as you may feel drowsy.
- **Do not smoke.** Smoking slows the healing process.

Care at home

For the first 24 hours after your surgery:

- Do not drive a car or operate heavy machinery.
- Do not drink alcohol.
- Do not sign any legal documents or important papers.
- Do not give care to others (e.g., children).



Do not drink alcohol while taking pain medication.

- Good PAIN CONTROL, lots of FLUIDS to drink, and REST will help you recover as quickly as possible. It will take about 2 weeks to heal.
- You should go home with a friend or family member and arrange for someone to stay with you for the first night.
- You should not go home alone.

Pain

- Earache and throat pain are normal after surgery. The pain may get worse until about day 3 to 7 after surgery. This is normal and is not usually a sign of complication.

- Taking the right amount of pain medication at regular times will help you manage your pain. **This is important for healing.** Please follow the health care provider's orders about what medications to take for pain. Please check the amount of medication carefully. The pain will get better after 7 to 10 days.
- Your doctor may give you a prescription for pain medication.
- **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 Tylenol® regularly (every 4 hours). Set an alarm at night to wake you up every 4 hours. Follow the package dosing instructions. Taking Tylenol® regularly helps the prescription pain medication work better, and may lower the amount of prescription pain medications you need. Do not take more than 4 grams (4000 mg) of Tylenol® per day.
- Take your pain medications regularly, especially for the first 3 to 5 days. **Do not wait until the pain is very bad before taking your pain medication, as it often takes 30 minutes for the medication to start working.**

- Pain medications will not take away all of your pain, but they will make it better.
- If you feel sick to your stomach, 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 such as Benadryl®, Claritin®, Reactine®, or Alerius® can help. It is best to take Benadryl® in the evening or at night, as it may cause drowsiness. Follow the package instructions for how much to take.
- For constipation, you can drink prune juice, eat dates, or use an over-the-counter medication such as Senokot® or RestoraLAX®.
- If you have a lot of side effects from the prescription pain medications, you may want to consider lowering your dose. Ask your pharmacist for help.
- It is normal to have very bad breath after surgery. You may also have fever up to 38.5° C for several days. Tylenol® can help. **If you have a fever for more than 3 days, go to the nearest Emergency Department.**

Drinking and eating

- Drink as much as possible (at least 2 to 3 litres a day). Do not stop drinking even if it hurts. Take lots of small sips if you need to.
- It is OK if you do not eat solid food for a week (7 days), as long as you are drinking fluids. Fluids include smoothies, popsicles, freezies, yogurt, pudding, Jell-O®, ice cream, soup, etc.
- You may eat whatever you feel you can swallow if it does not have sharp edges. Sharp edges on foods can catch on your incisions (cuts where your tonsils were taken out) and start bleeding.
- Add to your diet bit by bit over time. Soft foods such as mashed potatoes, macaroni and cheese, and eggs can be added.
- Chew all foods well before swallowing. Take sips of water with your food to help make swallowing easier.
- Thick mashed potatoes may be hard to swallow. Always take sips of water to help swallow mushy foods.

For the next 2 weeks, DO NOT:

- › cough or clear your throat excessively (a lot)
- › drink alcohol
- › eat foods hot enough to be uncomfortable in your mouth
- › smoke

Activity

- Get enough rest, as needed.
- **Do not drive a car for 2 days.**
- Do not take a long trip unless you have talked about it with your health care provider.
- Your health care provider will suggest when you can return to work or school. It is recommended that you take at least 1 to 2 weeks off school or work.
- Avoid all exercise, sports, dancing, and strenuous (hard) activities for 2 weeks after your surgery.
- Do not lift anything over 10 lbs for 2 weeks after your surgery.

Bleeding

- There is always a chance that bleeding can happen up to 2 weeks after surgery.
- After the first week, you can expect a scab to come off, which may cause a little bleeding. You may notice fresh red blood in your mouth, from your nose, or in your vomit.

If you spit up more than a teaspoon of fresh blood, this is not normal - go to the nearest Emergency Department.

- **If bleeding does not stop, go to the nearest Emergency Department.**
- Most of the time, bleeding is minor and stops without any treatment. However, a health care provider needs to check you. Surgery is rarely needed to stop the bleeding.

If you are coughing up or vomiting (throwing up) bright red blood or clots, go to the nearest Emergency Department.

Please note:

- You will see a white or grey covering in your throat where your tonsils were. This covering is normal when you are healing and should go away over time. It is not a sign of infection even if it smells.

A sign of an infection is a high fever (38° C/100.4° F or higher) about 4 or more days after your surgery. Tell your health care provider as soon as possible if you have a high fever.

- You will get an appointment to see your health care provider 4 to 6 weeks after your surgery.

This pamphlet is just a guide. If you have questions, please talk to your health care provider. We are here to help you.

