POST OPERATIVE INSTRUCTION SHEET TONSILLECTOMY +/- ADENOIDECTIONY

- You/your child has had a tonsillectomy and/or adenoidectomy performed. This commonly performed procedure is typically a day only or overnight admission. It can be done in combination with other procedures.

Immediately post-op:

- Your child may be quite drowsy. This normally improves over the course of the day, as does their oral intake. As their carer, it is most important to encourage oral intake of fluids, which is mandatory prior to discharge.

- I do not expect bleeding post operatively. If there is any, please advise the nursing staff looking after your child.

- I will sometimes request additional monitoring overnight if there is a history of sleep apnoea, including oxygen monitoring and CPAP.

- You/Your child will have a drip in their hand. This is important during their overnight admission, but will be removed prior to discharge.

Going home:

- In most cases, discharge is the following morning. However, if there is poor oral intake or complications related to sleep apnoea, this will be revised.

- If your child has had an adenoidectomy, it is likely that they will develop an unpleasant odour from their nose and mouth. This typically lasts for about 2 weeks, and it is recommended that you administer a saline nasal spray three times a day for 2 weeks. This is available over the counter from your local pharmacy.

- It is normal to have pain for the first 7-10 days – this is best managed with regular paracetamol every 4 to 6 hours. Do not exceed the recommended dose of paracetamol because this can result in serious complications. Thereafter, pain relief can be given on request. We often see an increase in oral pain as well as ear pain approximately 5 to 7 days after surgery.
• Post tonsillectomy bleeding can occur up to 14 days after the surgery (this occurs in 1-3% of children undergoing tonsillectomy). For this reason you must stay in a metropolitan area with access to a hospital with paediatric facilities for 2 weeks.

• If there is more than 2 teaspoons of fresh blood from the mouth following tonsillectomy, or persistent bleeding, we recommend you present immediately to your CLOSEST emergency department for review.

• It is normal for there to be a white/yellow covering of the tonsil bed (where the tonsils used to be) post-operatively. This represents NORMAL healing, and not infection.

• There is no evidence that post operative antibiotics reduce the rate of bleeding, pain, or poor post-op oral intake, therefore they should not be prescribed routinely.