SINUS SURGERY INFORMATION

In order to make your recovery from surgery as comfortable and event-free as possible, please read this instruction sheet. The suggestions are given for recovery from routine surgery, however circumstances occasionally require changes in the post-operative care. In these cases further instructions or medications will be given.

INFORMATION ABOUT PRE OPERATIVE CARE

- Unless otherwise instructed by your primary care/cardiologist, avoid any product that contains aspirin or ibuprofen for 10 days before the surgery. A complete list of medications to avoid will be provided to you. These medications increase the risk of bleeding during surgery, and surgery could be cancelled if you take one of these medications.
- We recommend obtaining a NeilMed salt water irrigation system. This can be purchased at any pharmacy before the surgery and will be used in the post-operative period.
- Do Not wear nail polish, make-up, or hair products on the day of surgery.
- Do Not wear jewelry or bring valuables with you on the day of surgery.
- Do Not eat anything after midnight prior to your surgery. Please see specific instructions under MEE “NPO guidelines”.
- Take your prescription medications as directed the night before your surgery and the morning of your surgery with a sip of water unless directed otherwise.
- You will likely receive a call from the MEE Pre-op medical unit on a day prior to surgery who will review your medical history and might provide instructions more specific to you and your medical history.

INFORMATION ABOUT THE SURGERY AND POST OPERATIVE PERIOD

- Do not blow your nose until seen at the first follow-up appointment.
- No straining or heavy lifting until seen at follow-up.
- Try sleeping with your head elevated for the first post-operative night.
- Slight oozing of blood from the nose or down the back of the throat is normal for the first 24-48 hours. You may change the gauze drip pad as needed. If a constant flow of blood is noticed, call for further instruction.
- You may eat a regular diet. Occasionally there is significant nausea after general anesthesia, but as soon as you feel able, you may eat as usual.
- Feel free to bathe or shower.
- You may experience some pain and a prescription for pain medication is available, however you should use this sparingly. Most patients require this medication only once or twice and often do just fine with Tylenol. Try to avoid ibuprofin, Motin, Advil, or aspirin for pain unless prescribed by your general physician or cardiologist.
- Feeling fatigued is normal and may last for two weeks after the surgery. Expect to become tired doing even normal everyday activities.
- Gently rinse the nasal cavities 3 times/day starting the morning after surgery using the sinus rinse system. This is important for clearing of old clots, mucous, and crusts that can contribute to scarring. An alternative to using the sinus rinse system is a blue bulb syringe. The solution is made by adding 1/4 teaspoon of salt (no iodine) and 1/4 teaspoon baking soda to 8 ounces of water. Use the full 8 ounces of solution to rinse both nasal cavities. Expect release of clots and blood with rinsing sometimes up to one week after surgery.
- Unless otherwise instructed, discontinue any nasal steroid spray (examples: Flonase, Rhinocort, Nasonex, Nasacort) until the follow-up appointment but resume all other pre-operative medications.
- Your first follow-up appointment will usually be 7-10 days after surgery. The sinus cavities will also be cleared of residual clots, mucous, and crusts. It may be worthwhile to take prescription pain medication prior to this visit, but only if someone is driving you to your appointment. Increasing pain, green to yellow drainage, and fever may be associated with an infection. Please call for further instruction if you experience these symptoms. If you experience any change in vision or active perfuse bleeding or drainage, call immediately 617-573-3209 or after hours at 617-523-7900.

We hope you have had a pleasant experience at MEE and wish you a comfortable and quick recovery.