

Septoplasty, Rhinoplasty, Septorhinoplasty, Turbinoplasty or Turbinectomy

For a healthy recovery after surgery, please follow these instructions.

- Septoplasty** is a repair of the nasal septum. You may have some packing up your nose or splints which stay in for 7 to 14 days. They will be removed at your follow up visit.
 - Rhinoplasty** is a repair of the nasal bones. You will have a small splint or plaster on your nose.
 - Septorhinoplasty** is a repair of the nasal septum and the nasal bone. You will have a small splint or plaster cast on your nose.
 - Turbinoplasty** surgery reduces the size of the turbinates in the nasal cavity.
 - Turbinectomy** is when the turbinates in the nasal cavity are reduced in size or cauterized.
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Activity

- Rest for the remainder of the day.
- Do not drive or operate heavy machinery for 24 hours after surgery.
- You may go back to work 1 to 4 weeks after your surgery. Please discuss this with your surgeon. You may go back to school 1 week after surgery.
- No physical sports or heavy lifting (about 20 lbs or 9 kg) for 2 to 4 weeks after your surgery.

Pain medication

- It is normal to have headaches and facial pain. This discomfort may last a few days, but should get better over time.
- Take acetaminophen (Tylenol) every 4 hours as needed. The usual dose is 325 mg to 650 mg every 4 hours. Acetaminophen is in a few medications that you may be taking for pain such as:
 - Plain Tylenol
 - Extra Strength Tylenol
 - Tylenol 1,2,3,4
 - Percocet
- **Do not take more than 4000 mg of acetaminophen in 24 hours.**
- If needed, take Ibuprofen (Advil or Motrin) for moderate or severe pain. This can be taken in addition to acetaminophen. The usual dose of Ibuprofen is 400 mg every 6 hours.
- **Do not take more than 1200 mg in 24 hours.**

Your surgeon may give you other prescription pain medication. Many medications, vitamins and supplements can cause bleeding. Do not take aspirin, or any other pain medications, supplements and vitamins unless prescribed by your surgeon.

Eating

- Eat your normal diet and drink plenty of fluids.

Dressing care

- You will have a small dressing under your nose called a 'drinker'. Bloody drainage, few small clots or pink secretions are normal for a few days. You may change the dressing as often as needed. Your nasal packing should only be changed by your surgeon.
- You may have nasal stents (small tubes up your nose), packing and/or a dressing under your nose.
- You may have splint or cast on your nose. Do not adjust or apply tape to it.

Special care

- You will need to breathe through your mouth.
- If you must sneeze, hold the dressing and open your mouth.
- For the first week do not bend forward. This may cause increased pressure of blood to your face and cause bleeding.
- Avoid blowing your nose. It would be better to sniff in secretions and spit them out.
- No hot baths for 24 hours after surgery.
- Sleep with your head raised (use 2 pillows) for the first week after surgery to help reduce swelling
- You can clean the outside of your nose with Q-tips and hydrogen peroxide. Your nose may be sensitive and dry.
- It is normal for the nose to feel stuffed up for 2 to 3 weeks. This is due to the swelling of the tissues after surgery.

CPAP

- If you have obstructive sleep apnea and use CPAP, please speak with your surgeon about how to use it after surgery.

Follow-up

- Your follow-up visit with the surgeon is about 1 to 2 weeks after surgery. You will need to call for an appointment.
- During this visit any nasal packing or stents will be removed.

Who can I call if I have questions?

- If you have any questions, please contact your surgeon's office.
- For urgent questions after hours, please call the Otolaryngologist – Head & Neck (ENT) surgeon on call at 905-521-5030.

When do I need medical help?

- If you have a fever 38.5°C (101.3°F) or higher.
- If you have pain not relieved by medication.
- If you have a hot or inflamed nose, or pus draining from your nose, or an odour from your nose.
- If you have an increase in bleeding from your nose or on your dressing.
- If you notice that you are swallowing blood or are vomiting blood which is red or brown.