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## Post-op Tonsillectomy/Adenoidectomy Instructions

### What to expect as normal:

1. Expect approximately a 2-week recovery process.
2. Bad breath is normal. It gets better as you heal.
3. You may not eat as much as normal or even much at all. That is normal. Just make sure you're drinking well. Solids are easier to swallow than liquids but liquids are more important. Jell-O is considered a liquid and is easier to swallow.
4. White patches in your throat and white specks on the tongue for 2 weeks or more are normal. Streaks of blood on the tongue are also normal.
5. Your ears and tongue may feel sore.
6. You may experience some temporary taste changes.
7. What you drink may come out of your nose initially but you should resolve.
8. You may also have a sore or stiff neck.
9. Low grade fever (less than 101.5° F) is normal. Good hydration will keep the fever down.
10. Mucus in the throat is expected. Good hydration helps that. You can try over-the-counter Mucinex (Guaifenesin) if you want. It can thin mucus as well if you are hydrated.
11. Nasal congestion is expected. It should be endured. Sleeping with your head elevated may help reduce it. Nose blowing may cause bleeding.

### What to watch out for:

1. Low grade fever is normal for the first week. Be more concerned about fever over 102° F.
2. Cough is rare unless present before surgery. New cough should be reported to your doctor.
3. Monitor bleeding from the mouth or nose.
4. Monitor urine output. You should be urinating 6 times or more each day and your urine should be clear without using caffeine (coffee, tea, caffeinated drinks).
5. Over sedation or sleepiness. The first 6 hours (even up to 24 hours) after surgery you have risk of not maintain oxygen levels or breathing right. Someone should be with you while sleeping to make sure you are breathing well during this time period.
  - a. Narcotic pain mediation can make you extra sleepy. If this is happening, please call the office for an adjustment of the pain dosing or change of medication.

### What to do:

1. Drink plenty of fluids (Jell-O and ice cream count).
2. Avoid caffeinated beverages (and alcohol).
3. Avoid clearing your throat. See #10 above.
4. Take pain medication before it becomes too painful to swallow. Tylenol and ibuprofen often suffice the first 1-2 days. You will have stronger pain medication if needed (usually hydrocodone liquid). **If you need and are using hydrocodone more than a couple of doses, stop additional**

**Tylenol. Avoid taking more than 3000 mg of Tylenol per day (each 15 ml of hydrocodone has 325 mg of Tylenol in it).**

5. Lidocaine if prescribed should be sipped from a syringe or medicine cup over 1 hour for each dose.
6. Avoid aspirin and Aleve (naproxen) during the first two weeks after surgery.
7. Cold (ice, ice cream, etc...) foods may also help with mouth and throat pain.
8. Wake up at night and take ibuprofen to help with morning pain.
9. If pain is getting worse, hydrate more. If you are urinating at least 6 times each day and the urine is clear you are likely well hydrated. If these measures are met and it is still too difficult to manage, please call the office.
10. Do not drive while taking narcotic pain or anti-nausea medication. Some narcotic pain medication can cause itching. Benadryl can take care of this. Benadryl, Phenergan (if prescribed) and narcotic pain medication can all make you sleepy. Together they can decrease your ability to breathe. Be careful using all of these medications together.
11. Restrict activities for 2 weeks. No lifting more than 10 lbs. (1 gallon of milk). No strenuous activities. You may return to school/work after 1 week if desired with 10 lb. lifting restrictions in place and no bending over or stopping. No forced physical activities such as organized sports, skiing/snowboarding, physical education, etc... for the full 2 weeks.
12. Restrict your diet. Avoid foods that are rough or sharp. If the food is soft enough to compress between your fingers, it is probably okay to eat (e.g., soft carrots/peas, soft meats like bologna, lunch meats, soft pasta, cream-o-wheat/grits/oatmeal, canned soups, etc...).
13. Have a regular bowel movement to prevent constipation and vomiting. MiraLAX over-the-counter, given 1 to 2 caps per day, can help (it mixes with anything made of water and is flavorless). You may also use prune juice mixed with Sprite. If already constipated a couple of squares of Ex-Lax will get you started.
14. Go to the emergency room for:
  - a. Bleeding tablespoons of blood from the mouth.
  - b. Not being able to drink for 24 hours or urinating only once per day for 1 day.
  - c. New onset chest pain or shortness of breath.
  - d. New cough or fever greater than 101.5° F.