



Wayne J. Harsha, MD

SINUS SURGERY POSTOPERATIVE INSTRUCTIONS

**THIS INFORMATION WAS ADAPTED FROM THE STANFORD UNIVERSITY PROTOCOL,
WHICH MAY BE FOUND HERE:**

[HTTPS://STANFORDHEALTHCARE.ORG/MEDICAL-TREATMENTS/N/NASAL-SURGERY/WHAT-TO-EXPECT.HTML](https://stanfordhealthcare.org/medical-treatments/n/nasal-surgery/what-to-expect.html)

Nasal packing/splints

You may have either nasal splints or nasal packing in the nose following surgery. The surgeon will let you know on your discharge paperwork. If there is removable material in the nose, these will be removed about one week after surgery/

Pain control

You will be prescribed pain medication after nasal surgery. Take as you need for pain control. If you prefer to avoid narcotics, you should feel free to use acetaminophen (Tylenol®).

Bleeding

It is normal to experience small bleeding for a couple of days after surgery. You may dab your nose gently with tissue, but **DO NOT BLOW YOUR NOSE**. Avoid aspirin, NSAIDs (such as ibuprofen, Advil®, Motrin®, naproxen, or Aleve®), for at least two weeks because they can increase the risk of bleeding after surgery. You may use nasal topical decongestants (such as Afrin® spray) two sprays each nostril twice daily for three days and then as needed to control small bleedings, for a maximum period of time of one or two days. The decongestant decreases the amount of swelling in the nose and can keep the nasal passages open during the healing phase.

Nasal Saline

*2032 Medical Park Drive, Newberry, SC 29108
Phone: (803) 630-5353
Fax: (803) 630-5343
<http://www.carolinapinesent.com>*



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It is important that you purchase (over-the-counter) NeilMed Sinus Rinse. We recommend that you purchase the box with 50 saline packets, as this will get you through the postoperative period. Additionally, you will need to purchase distilled water. Do not use tap water, whether city/county or well. Begin irrigation the day after surgery and do it 3-4 times a day (you may do more if you feel it improves your comfort). Do the irrigations over the sink, and do not plug off the other side of the nose, and do not close your mouth. Squeeze about half the bottle in each nostril.

Minimize physical activity for two weeks

Patients can resume normal daytime activities if they have undergone isolated nasal surgery. Walking and spending more time out of bed rather than in bed are helpful to reduce risks of developing pneumonia or blood clots in the legs. However, patients should avoid strenuous activity, it can increase swelling or cause bleeding.

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RISKS OF ENDOSCOPIC SINUS SURGERY (FESS) +/- SEPTOPLASTY

The patient meets the indications for endoscopic sinus surgery +/- septoplasty.

The risks, benefits, indications, complications and alternatives to this procedure were discussed with the patient/family. The alternatives discussed include observation and continued conservative/medical therapy.

The following risks were discussed:

- *Bleeding:* Most sinus surgery involves some degree of blood loss, which is generally well tolerated by the patient. About 1% of the time, significant bleeding may require termination of the procedure. Although most patients do not require nasal packing, a few patients will require a small nasal pack or tissue spacer to be removed after one week.
- *Recurrence of disease:* Although endoscopic sinus surgery provides significant symptomatic benefits for the vast majority of patients, In some instances, additional "touch-up" or revision surgery may be necessary to optimize your surgical outcome.
- *Spinal (CSF) fluid leak:* Because the sinuses are located near the brain, there is a rare chance of creating a leak of spinal fluid (the fluid lining the brain) or injuring the brain. Should the rare complication of a spinal fluid leak occur, it may create a potential pathway for infection, which could result in meningitis.
- *Visual problems:* Visual loss has been reported after sinus surgery due to injury to the eye or optic nerve. The potential for recovery in such cases is not good. Fortunately, such a complication is extremely rare, much less than 1% of all sinus surgery cases. Injury to the eye muscles may result in double vision. Persistent tearing of the eye is another possible complication.
- *Other risks:* Other uncommon risks of surgery include alteration of sense of smell or taste; persistence and/or worsening of sinus symptoms and facial pain; change in the resonance or quality of the voice; and swelling or bruising of the area around the eye.

If you require septoplasty, there are additional risks associated with this procedure.

- Creation of a hole connecting the right and left sides of the nasal cavity

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- Numbness of the upper teeth and nose
- Cerebrospinal fluid leak (extremely rare)
- Change in the external shape of the nose

Responsible Party Signature: _____ *Date:*

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