ADENOIDECTOMY (Removal of the Adenoids)

Removal of the adenoids (adenoidectomy) may be recommended for chronic ear problems, chronic adenoid and sinus infections, nasal obstruction, or snoring. The "adenoids" are lymphoid tissue that are at the back of the nose. Sometimes this surgery is done at the same time as another procedure (often when removing the tonsils).

The instructions below are only related to recovery from adenoidectomy.

• A follow-up appointment should be made for 2 weeks after surgery. It is preferable to stay in town for 2 weeks after surgery, in case any issues arise.

• Diet should begin with liquids and gradually be normalized 1-2 days after surgery. Fluids should be encouraged, especially in children.

• Strenuous activity should be avoided. Most patients can return to day care, school, or work the day after surgery.

• Anesthesia may cause fatigue, sleepiness, and nausea. Children may be irritable, fussy, and tug at their ears. Most of the time, acetaminophen is all that is needed.

• Nausea/vomiting may occur as a result of anesthesia and/or pain medications. This usually improves within 24-48 hours after surgery. If vomiting occurs, avoid all food and liquids for a two to three hours, then begin slowly with ice chips and then clear liquids (diluted Sprite, clear juices). If vomiting persists, please call the office.

• Fever may occur because of a preexisting infection. If not already taking a prescription pain medication, use Tylenol for children to make them more comfortable. If the fever persists over 102 degrees despite use of Tylenol, call the office. If your physician has written a prescription for antibiotics, be certain to finish the course of medications.

• Foul-Smelling breath is a common finding for 7 to 14 days after adenoidectomy. Nasal drainage until the site has completely healed is not unusual for up to two weeks.

• Pain may occur in the neck, throat, nose or top of the head. This occurs often because of expected swelling. If pain is persistent or severe, call the office.

• Change in voice, such as a nasal voice (talking through the nose) is usually temporary and is caused by stiffness of the roof of the mouth. If this persists, please call this to the attention of the physician at the follow-up visit.

• Bleeding may manifest as a nosebleed or coughing/vomiting of blood. Avoid strenuous activity and maintain elevation of the head. If bleeding persists, notify the office, at 972-731-7654.