

ENT ASSOCIATES

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INSTRUCTIONS AND INFORMATION FOR SINUS SURGERY

ABSOLUTELY, DO NOT TAKE ASPIRIN, MOTRIN, IBUPROFEN, ADVIL, EXCEDRIN, ALEVE NAPROXEN, NUPRIN, ALKA-SELZER, OR SIMILAR NON-TYLENOL PAIN RELIEVERS FOR 2 WEEKS BEFORE AND AFTER SURGERY UNLESS APPROVED BY YOUR SURGEON. THESE INCREASE THE RISK OF BLEEDING! DO NOT TAKE OVER-THE-COUNTER SUPPLEMENTS FOR 2 WEEKS BEFORE OR AFTER YOUR SURGERY UNLESS APPROVED BY YOUR SURGEON.

Common reasons for performing sinus surgery include:

- Chronic sinus infection despite treatment with antibiotics.
- Nasal polyps.

Alternatives to surgery include the following:

- **No treatment** – simply watching your symptoms to see if they improve or become worse.
- Medications such as antibiotics, allergy medications, and/or allergy shots in some situations.

What to expect during surgery:

- May be performed with either local anesthesia plus sedation or with general anesthesia.
- Normally performed as outpatient surgery.
- Most sinus surgery is performed with endoscopes and equipment through the nostrils without external incisions. In occasional cases, incisions in the skin or in the mouth beneath the upper lip are necessary.
- Surgery normally lasts several hours.
- Straightening of the nasal septum may be necessary. The septum is a wall that divides the nasal cavity into the right and left sides. This procedure is called Septoplasty, and is performed to:
 1. Improve nasal blockage.
 2. Enhance sinus drainage in some cases.
 3. Allow better access for working on the sinuses.
- The lower or middle turbinates may need to partly removed or cauterized to reduce their size to help improve nasal obstruction.

What to expect after surgery:

- **Pain** – Generally mild to moderate and well-controlled with pain medicine.
- **Scabbing and crusting** – Common for several weeks. Nasal saline spray reduces this.
- **Nasal obstruction** – The nose may feel plugged for several weeks after surgery.
- **Packing** – Generally does not need to be placed, but may be placed in the nose for several days or a week. Removal may be uncomfortable – taking pain medication beforehand on that day may be helpful.
- **Office appointments** – You will usually need to be seen in one week following the surgery and possibly several other visits following that to look in nose with scope and remove crusts and debris. It is helpful to take pain medicine before these visits.

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- **Medication** – You will be given a prescription for pain medication and/or antibiotics. Patients with sinus problems frequently benefit from a nasal steroid spray and/or allergy medication after surgery. **Our office will call you the day before surgery with your arrival time unless otherwise instructed by our staff.**

General Information:

- **You may not eat or drink ANYTHING after midnight the night before your surgery.**
- **Day of surgery** – Please arrange for someone to drive you and to stay with you the night after surgery.
- **Postoperative visits** – These are done to remove sutures, remove packing from the ear, for hearing tests, and as otherwise necessary.

Activity after surgery:

- **Activity** – Avoid strenuous activity for about 3 weeks after surgery.
- **Nose blowing** – Gentle nose blowing is OK after 2-3 weeks.
- **Saltwater spray** – (Salinex, Ocean Spray, etc.) needs to be used every hour while awake for several weeks following surgery.

Risks of surgery include:

All surgery involves certain risks, including death, infection, and bleeding and anesthesia complications. Sinus surgery is usually safe, but some of the risks include:

- **Infection** – Sinus surgery is usually performed because of infection and the possibility exists for spread of infection to areas around the nose and sinuses.
- **Vision** – The eye and nerve to the eyes (optic nerve) are located adjacent to the sinuses so that vision impairment or loss of vision is a possible complication
- **Brain and other nervous structures** – The brain, some nerves and related structures are adjacent to the sinuses so that injury to these or leakage of cerebrospinal fluid (fluid surrounding the brain) is a possible complication. This can lead to a serious infection around the brain called meningitis.
- Injury to the nose, sense of smell or other nearby structures.
- Possible need for further medical/allergy treatment or surgery.

Alternative treatments, risks and benefits were discussed with the patient and/or family.

Thank you again for the opportunity to participate in your health care! Please let us know if we can answer any further questions or how we may make your surgical experience more pleasant!

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Electronically Signed