



Post-Operative Care Following Functional Endoscopic Sinus Surgery

What is Functional Endoscopic Sinus Surgery (FESS)?

FESS is a technique of using small rigid optical telescopes, or endoscopes, to perform sinus surgery through the nose. This technique has revolutionized the surgical treatment of chronic rhinosinusitis. FESS eliminates the need for external incisions and allows for better visualization and magnification of diseased or problem areas. In general, your sinus surgeon will carefully enlarge natural drainage pathways of the sinuses to restore their function and health. We will preserve normal mucosa while removing chronically inflamed mucus membranes, delicate bony partitions, polyps, and infected secretions in order to open the sinuses more widely and restore normal function to the sinuses. Sinus surgery significantly improves symptoms of chronic sinusitis. Your surgery may also include straightening a deviated septum and reducing your turbinates to improve your nasal airway.

What You May Feel Post-Surgery:

Recovery after endoscopic sinus surgery and general anesthesia is different for everybody. Most patients will feel ready to go back to normal daily activities within a few days, and others may require a week. Very few patients require prescription pain medication after the first 2-3 days, and many patients do not need it at all. It is normal to feel tired throughout the first week of recovery. We generally recommend planning for 1 week away from work, although many patients feel ready to go back sooner than that. We also recommend assistance with difficult activities like child care.

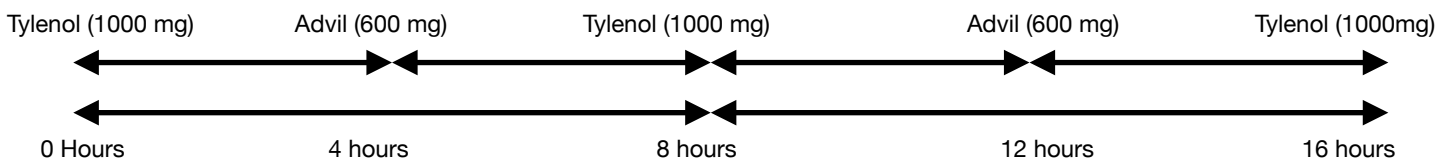
- **Bleeding:** It is normal to have some blood in your nasal discharge for the first couple weeks after sinus surgery. If steady or brisk bleeding occurs after surgery, use Afrin spray, tilt your head back slightly, breathe through your nose gently. Use approximately 4 sprays in the nostril that is bleeding. You may also have a bit of bleeding after your post-operative debridements (see below). If bleeding persists, please call our office or go to the ER.
- **Pain:** You should expect some nasal and sinus pressure, soreness, or pain for the first few days after surgery. This may feel like a sinus infection or a dull ache in your sinuses. Extra-strength Tylenol is usually all that is needed for routine post-operative discomfort. If Tylenol is not sufficient to control the pain, you may use the postoperative pain medication we have prescribed. Please take these narcotic medications with food, and use stool softeners (Miralax works well) if you are taking prescription pain medication. You should avoid aspirin. NSAIDs such as Motrin, Advil, and Aleve are okay to take as well in conjunction with Tylenol (see below). Many prescription pain medications already contain Tylenol (acetaminophen), so do not take additional Tylenol together at the same time.
- **Nasal congestion and drainage:** You will have some nasal congestion and thick drainage for the first two weeks after surgery. Your post-operative “debridement” will help reduce this congestion (see below) after we remove some of the secretions and crust that accumulates in the sinuses after surgery. You may use Afrin (2 sprays in each nostril, twice daily) for the first 5 days after surgery to help with nasal congestion.
- **Nasal irrigations:** Nasal saline irrigation is essential for proper healing. Beginning the day after surgery, use nasal saline irrigations twice daily as instructed, and if you are unsure how to do it, please give us a call. Moisturization and clearance of clots is critical to proper healing.
- **Packing:** We do not use old-fashioned “packing.” At the end of your procedure, we may place an absorbable dressing or dissolvable medicated stent if we think this will improve your healing. Often we place nothing at all.

Pain Management:

- **Tylenol (Acetaminophen):** Adults can take up to 4000 mg of Tylenol in a 24 hour period while infants and children can take 10-15 mg/kg per dose every 4-6 hours.
 - *Adults:* Take 1000 mg every 8 hours or 650 mg every 4-6 hours for pain
 - *Children & Infants:* Take 10-15 mg/kg every 4-6 hours for pain
- **Advil (Ibuprofen):** Ibuprofen should be alternated with Tylenol to maximize control of pain. The best way to take the Ibuprofen is in-between your doses of Tylenol to provide the best pain control.
 - *Adults:* Take 600 mg of Ibuprofen every 4-6 hours for pain
 - *Children & Infants:* Children under the age of 11 should take 5-10 mg/kg every 6-8 hours; while children over the age of 12 should take 400 mg every 4-6 hours
- **Oxycodone:** Oxycodone is a opiate medication that provides very good pain control. Oxycodone should be used as a breakthrough pain medication when you are not getting enough pain control from Tylenol and Ibuprofen. Oxycodone is usually prescribed as either 5mg or 10mg pills taken every 4-6 hours for pain.

How To Take Your Pain Medication:

The best way to provide pain control is to take your pain medication around the clock at scheduled times rather than waiting for the pain to settle in. This will help you stay ahead of your pain for the most comfort. You should begin by taking the Tylenol and Ibuprofen at scheduled intervals and only use the Oxycodone for breakthrough pain when needed. For example if you decide to take Tylenol and Advil every 8 hours. The medications should be alternated so you are taking one of these medications every 4 hours. This ensures each medication class is taken 8 hours apart from each other but some form of pain medication is provided every 4 hours.



Oxycodone is taken every 4-6 hours as needed for breakthrough pain

Post-Operative Visits

Post-op visits are very important to make sure your sinuses heal properly. We usually see patients about 7-10 days from surgery, and again 3 or 4 weeks after that. Occasionally, more frequent visits are necessary. Debridements (removal of crusts or blood clots) may be performed at these visits in order to ensure proper healing and a great long-term outcome.

IMPORTANT -- DOs & DO NOTs

- DO NOT blow your nose for 1 week after surgery, until you see the surgeon back in the office.
- DO NOT bend, lift, strain, or lift anything heavier than a gallon of milk for at least one week after surgery. These activities increase the risk of bleeding. You should not do any aerobic or rigorous activity until the healing is completed (~2 weeks).
- DO NOT suppress the need to cough or sneeze, or pinch your nose to sneeze. Sneeze with your mouth wide open.
- DO NOT use aspirin or other blood thinners until given permission.
- DO NOT drive while taking prescription pain medication.
- DO NOT swim until 3-4 weeks after surgery.
- DO start with liquids and bland foods after general anesthesia, as you may have some nausea.
- DO sleep with your head elevated on a few pillows.
- DO use nasal saline irrigations as described above.
- DO drink plenty of fluids. Many patients like a humidifier by their bed as well.
- DO some routine light activity. Feel free to walk around or up stairs, run light errands, and enjoy yourself. Do not lie in bed for extended periods of time.
- DO continue antibiotics and/or oral steroids as directed. Many patients like to take probiotics or eat yogurt while taking antibiotics. If you have diarrhea, vomiting, or any other side effects from your medicine, please call our office.
- DO ask your doctor about restarting Aspirin or any blood-thinner medication.
- DO take stool softeners if you are taking prescription pain medication.
- DO ask your doctor about any upcoming airplane travel.

When to call us

- Nosebleed that persists even after using Afrin
- Temperature above 100.8F
- Persistent clear watery drainage from your nose
- Changes in your vision or swelling of your eyes
- Worsening headache
- Neck stiffness
- Or any other concerns! blood thinners.

Follow-up Appointment:

Your follow up appointment is about **7-10 days** from the day of your surgery. It's essential to attend your follow-up appointment with your surgeon to monitor the healing process and address any concerns. Always follow the specific instructions given by your surgeon or healthcare team. If you have any concerns or notice any unusual symptoms, contact your healthcare provider immediately.

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