

MILLENNIUM SURGERY CENTER, Inc.

3850 San Dimas Street, Bakersfield, CA 93301 (661) 663-3700

Head and Neck Discharge

General, Spinal, Sedation or Local Anesthesia

- Do not drive or operate machinery for 24 hours or anytime narcotics are being used.
- No alcohol, tranquilizers, sleeping medication or non-prescribed medication for 24 hours.
- Do not make important decisions or sign any important papers for 24 hours after surgery.
- Patients receiving General Anesthesia must have someone stay with them for 24 hours.
- Children may appear flushed for several hours after surgery.
- Nausea/vomiting, drowsiness or dizziness may occur after anesthesia.
- Periodic deep breathing & coughing while awake for the first 48 hours.

Activity

- We recommend you go directly home. Restrict your activities for the rest of the day.
- No strenuous activity or heavy lifting.
- Change your position slowly to prevent dizziness.

Fluids and Diet

- Begin with clear liquids and light foods. Progress diet as tolerated.
- Increase fluids and fiber to prevent constipation, which can occur while taking pain medication.

Prescription(s)

- Use as directed: _____

- Your prescription has been phoned to: _____
- You may resume your daily prescription medication schedule. Do not resume Coumadin unless specifically instructed. Do not take Aspirin or any non-steroidal anti-inflammatory drug (e.g. Motrin).

P.E. Tubes

- Notify physician of excessive bloody drainage from ear (more than a saturated cotton ball).
- Keep water out of ears because of the infection potential. Use custom made ear plugs or cotton balls coated with petroleum jelly.
- Hearing may not improve for 1-3 weeks post op.
- Tubes will remain in place for 2-10 months and are designed to extrude into the external ear canal. When tubes extrude, slight pain and a small amount of bloody drainage may occur. Call your M.D. if the tubes fall completely out.

Tympanoplasty

- Notify your Physician if you experience increased ear pain or continued dizziness (some dizziness is expected).
- External dressings may be reinforced if soiled, but leave inner dressing intact.
- Avoid wetting the dressing while bathing. Your Physician will tell you when you can shampoo.
- No forceful blowing of the nose. Keep your mouth open if blowing is necessary.

Tonsillectomy and Adenoidectomy

- Drink plenty of fluids.
- Drinking cool liquids will help with throat soreness, dryness, and promote healing.
- Avoid red food and dairy products for 24 hours. Avoid crunchy food for 10 days.
- A cool mist humidifier may be used if desired.
- If nausea/vomiting occur, stay in bed and remain on clear liquids until the symptoms subside. It is not unusual to vomit dark blood after surgery and this is no cause for alarm. The blood was swallowed during surgery and you will feel better after vomiting. If you do vomit, rest your stomach for 1 hour, and then start on sips of clear fluids.

Septoplasty

- Mouth breathing will cause increased dryness. Drink extra fluids.
- Change the gauze pad under nose as it becomes saturated. Call your M.D. if you are changing the pad more frequently than every 30 minutes.
- Keep your head elevated on 2-3 pillows for 24 hours.
- Swelling and bruising is to be expected and will gradually subside. Ice is helpful for the first 48 hours. Do not apply directly on skin.
- Do not remove nasal packing. This will slowly start to dissolve after a few days.
- Do not blow your nose. Blot nose gently. Avoid sneezing, if possible. If necessary, sneeze with mouth open.
- For your follow-up appointment call Dr. _____ office at _____ to make an appointment.

CALL YOUR SURGEON FOR ANY OF THE FOLLOWING PROBLEMS. AFTER OFFICE HOURS, YOUR PHYSICIAN CAN BE REACHED THROUGH THE ANSWERING SERVICE. IF YOU ARE HAVING PROBLEMS AND UNABLE TO REACH YOUR PHYSICIAN, GO DIRECTLY TO THE EMERGENCY ROOM.

- * Fever above 101 degrees
- * Increased redness, warmth, hardness around operative site
- * Excessive drainage from operative site
- * Progressively increased swelling around operative site
- * Continued nausea/vomiting

- * Inability to urinate
- * Rash or itching after taking medication
- * Pain not relieved from medication
- * Excessive bleeding from operative site
- * Frequent swallowing (after T&A)

INSTRUCTIONS RECEIVED BY _____

NURSE SIGNATURE _____ **DATE** _____