



## POSTOPERATIVE CARE OF THE TONSILLECTOMY PATIENT

### **Diet**

It is extremely important that the patient drink large amounts of fluids daily for 2 weeks. Any fluid or semi-solid foods (ice cream, pudding, popsicle, etc.) are acceptable. Failure to drink increases the risk of bleeding and increases the pain felt in the throat.

Tonsillectomy patients may start soft foods when they feel able and progress to a regular diet as throat pain allows.

### **Pain**

With tonsillectomy, throat and ear pain are to be expected, possibly up to 2 weeks after surgery.

Take prescribed medication as follows:

**Narcotic Pain Medication (Hydrocodone)** every 6 hours and alternate with **Ibuprofen** 600mg every 6 hours.

For example: Hydrocodone at 9a.m., Motrin at 12p.m., Hydrocodone at 3p.m., Motrin at 6p.m., etc.

Use the attached medicine log to help keep track.

**Prednisone:** Take prescribed steroids as directed on prescription.

**Viscous Lidocaine:** Use between doses of the above pain medications for breakthrough pain. It is helpful to use this medication before trying to eat.

It is helpful to take medication with a little food to help with nausea. Again, drinking large amounts of fluids reduces pain most effectively.

### **Activity**

It is recommended that strenuous activity that may raise the blood pressure be avoided for 2 weeks after surgery. This includes sports activities, bicycling, swimming, weightlifting, exercise, PE or recess, dance, gymnastics, etc. Patients may return to work/school as they feel able (usually 1 week for children, 2 weeks for adults). Notes will be provided for school or work if necessary.

### **Bathing**

The patient may take only warm showers or baths for 2 weeks after surgery.

### **Fever**

A low-grade temperature (99-100) is common during the first 2-3 days after surgery. A fever over 100 is indicative that the patient is not drinking enough, and fluids need to be increased. If the fever exceeds 101, please notify the physician.

### **Bleeding**

Small amounts of blood-tinged mucous from the mouth or nose are not uncommon. Bright red blood should be reported immediately, and Afrin spray or drops should be instilled in the nose. The patient may also hold extremely cold liquid in the mouth to help slow the bleeding.

**Please contact our office at 478-743-8953 if you have any questions or concerns.**



PLEASE ATTEMPT TO CONTACT OUR OFFICE FIRST SO THAT WE MAY ADVISE YOU APPROPRIATELY.  
IF, FOR ANY REASON, YOU ARE UNABLE TO REACH OUR OFFICE OR YOUR SURGEON IN AN EMERGENCY,  
PLEASE GO TO THE NEAREST EMERGENCY ROOM.