



Tonsillectomy & Adenoidectomy Post Op

The tonsils are two pads of tissue located on both sides of the back of the throat. Adenoids sit high on each side of the throat behind the nose and the roof of the mouth. Tonsils and adenoids are often removed when they become enlarged and block the upper airway, leading to breathing difficulty. They are also removed when recurrence of tonsil infections or strep throat cannot be successfully treated by antibiotics.

The procedure to remove the tonsils is called a tonsillectomy; excision of the adenoids is an adenoidectomy. Both are usually performed concurrently; hence the procedure is known as a tonsillectomy and adenoidectomy or T&A.

T&A is an outpatient surgical procedure lasting between 30 and 45 minutes and performed under general anesthesia. Normally, the patient will remain at the hospital for about four hours after surgery for observation. An overnight stay may be required due to the patient's age or complications such as excessive bleeding or poor intake of fluids.

When the T&A patient comes home

Most children require 7-10 days to recover from the surgery. The older the patient the longer the recovery takes in most cases. Some patients take two full weeks to fully recover.

- **Drinking:** The most important requirement for recovery is for the patient to drink plenty of fluids. Milk products should be avoided in the first 24 hours after surgery. Offer juice, soft drinks, popsicles and Jell-O (pudding, yogurt and ice cream after 24 hours). Some patients experience nausea and vomiting after the surgery caused by the general anesthetic. This usually occurs within the first 24 hours and resolves on its own. Contact your physician if there are signs of dehydration (urination less than 2-3 times a day or crying without tears).

MINIMAL fluid intake for the first 24 hours:

Weight of patient	Minimal fluid intake
Over 20 pounds	34 ounces
Over 30 pounds	42 ounces
Over 40 pounds	50 ounces
Over 50 pounds	58 ounces
Over 60 pounds	68 ounces

- **Eating:** Generally, there are no food restrictions (other than milk products) after surgery. The sooner the child eats and chews, the quicker the recovery. T&A patients may be reluctant to eat because of sore throat pain; consequently, some weight loss may occur, which is gained back after a normal diet is resumed.



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- **Fever:** A low-grade fever may be observed several days after surgery. Contact your physician if the fever is greater than 102°.
- **Activity:** Bed rest is recommended for several days after surgery. Activity may be increased slowly, with a return to school after normal eating and drinking resumes, pain medication ceases, and the child sleeps through the night (at least 7 days after surgery). Travel away from home is not recommended for two weeks following surgery.
- **Breathing:** The parent may notice abnormal snoring and mouth breathing due to swelling in the throat. Breathing should return to normal when swelling subsides, 10-14 days after surgery.
- **Scabs:** A scab will form where the tonsils and adenoids were removed. These scabs are thick, white and cause bad breath. This is not unexpected. Most scabs fall off in small pieces five to ten days after surgery and are swallowed.
- **Bleeding:** With the exception of small specks of blood from the nose or in the saliva, bright red blood should not be seen. If such bleeding occurs, contact your physician immediately or take your child to the emergency room. Bleeding is an indication that the scabs have fallen off too early and medical attention is required.
- **Pain:** Nearly all patients undergoing an tonsillectomy and adenoidectomy will have mild to severe pain in the throat after surgery. Some may complain of an earache (because stimulation of the same nerve that goes to the throat also travels to the ears), and a few may incur pain in the jaw and neck (due to positioning of the patient in the operation room).
- **Pain control:** Your physician will prescribe appropriate pain medications for the patient. Generally, this means liquid ibuprofen that is taken every 5-6 hours around the clock for the first 7-10 days. In addition, a hydrocodone/Tylenol® preparation will be prescribed for breakthrough pain.

If you are troubled about any phase of your recovery or your child's recovery, contact Dr. Masin or the doctor on call immediately.

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