

SINUS SURGERY (FESS) **Post Operative Instructions**

Nurse Line (8:30am to 5pm)	937-496-0261
Emergency After Hours Line	937-496-2600

The Surgery Itself

Endoscopic sinus surgery (with or without septoplasty) involves general anesthesia, typically for 1-2 hours. Patients remain sleepy for the better part of the day. Nausea and vomiting are occasionally seen, and usually resolve by the evening of surgery on its own. Almost all patients can go home the day of surgery.

After Surgery

- Facial pressure similar to a sinus infection/headache is normal after surgery. Breathing through your nose is also difficult due to swelling. A humidifier or vaporizer can be used in the bedroom to prevent throat pain with mouth breathing.
- Bloody nasal drainage is normal after this surgery for 5-7 days, usually decreasing in volume with each day that passes. If heavy bleeding occurs, use a decongestant nasal spray with Oxymetazoline (usually provided after surgery) and hold pressure for 10min. If this does not stop, then contact our office or go to the Emergency Dept.
- Frequent hot showers or saline nasal rinses (NeilMed) will help break up congestion and clear any clot or mucus that builds up within the nose after surgery.
- It is more comfortable to sleep with your head elevated in a reclining chair or with a wedge pillow for the first week.
- Do not blow your nose for 2 weeks after surgery. Use a saline rinse if you feel blocked up.
- Avoid lifting > 10 lbs. and no vigorous exercise for 2 weeks
- Avoid airplane travel for 2 weeks following sinus surgery.

- Sense of smell and taste are often diminished for several weeks after surgery. There may be some tenderness or numbness in your upper front teeth, which is normal after surgery. You may have old blood clots and scabs from your nose for up to 3-4 weeks after surgery.
- You may have dissolving sutures inside of your nose after surgery that will slowly dissolve in 2-3 weeks.
- You may gently clean your nostrils 2 times per day using dilute hydrogen peroxide (mixed 1:1 with tap water) on a Q tip.

Medications

- Pain medication is often (but not always) prescribed. Pain and pressure in the nose is expected after surgery. As the surgical site heals, pain will resolve over the course of a week. Pain medications can cause nausea, so take with food. **IT IS OK TO TAKE OVER THE COUNTER PAIN MEDICATION (IBUPROFEN, NAPROXEN, or ACETAMINOPHEN) IN ADDITION TO YOUR PRESCRIBED MEDICATIONS. DO NOT TAKE ASPIRIN UNLESS CLEARED WITH YOUR SURGEON.**
- Limit Acetaminophen/Tylenol to less than 4,000mg/day
- Limit Ibuprofen/Motrin to less than 3,600mg/day
- You may be given an antibiotic after surgery to prevent infection. Take this medication with food to prevent nausea or vomiting.
- Oxymetazoline nasal decongestant spray (Afrin, sinex) can be used up to 2 times a day for up to 5 days after surgery to reduce bloody drainage. This is usually provided by the hospital after surgery. **DO NOT TAKE FOR MORE THAN 5 DAYS AFTER SURGERY.**
- Your doctor may provide you with saline nasal spray (or flushes) to use after surgery as well to keep your nose moist and to clear blood clots. Follow your specific doctor's instructions.
- Take all of your routine medications as prescribed, unless told otherwise by your surgeon. **Any medications that thin (like ASPIRIN) the blood should be discussed with your surgeon.**