



## **POST OPERATIVE INSTRUCTIONS FOR ADENOIDECTOMY**

The adenoids are made of lymphoid tissue, forming part of our immune system. They are a clump of tissue at the back of the nose and if they become enlarged or infected, they can lead to a blocked nose, recurrent ear infections, hearing problems, snoring and possible sleep apnoea.

To remove the adenoids, a special suction diathermy instrument is used to remove the tissue and cauterize the blood vessels, with no sutures required. The operation usually takes around 10-15 minutes in total. After adenoidectomy, most patients will be able to go home on the same day.

Recovery from adenoidectomy is generally very quick with minimal pain; occasionally patients have an earache in the first 24-48 hours. Panadol or Painstop should be sufficient to relieve pain. Do not take aspirin, ibuprofen, or diclofenac, as these can all increase bleeding risk. Bleeding after adenoidectomy is rare but can occur up to 10 days post-op. Most bleeding is minor, with a small coating of blood seen on the tongue or from the nose. Watch for spitting, coughing, or vomiting of blood and if there is more than a tablespoon of blood seen, please call the surgeon.

An antibiotic may be prescribed to prevent infection. Please contact your surgeon if your child develops any neck stiffness or fevers, as these are signs of infection. Patients may notice an offensive smell or bad breath at or around day 5 after surgery – this is a normal part of the post-operative recovery and is not a sign of infection. A normal diet, including solids is encouraged, with no food restrictions necessary.

After the surgery, children should rest but may feel able to play inside after 1-2 days. They may return to school after one week.