

## Benefits of surgery

1. Elimination or reduction of adenoid/ tonsil infections
2. Possible improvement of obstructive breathing

## Most common risks and complications

1. Pain- can expect pain approximately up to 2 weeks after surgery- make sure you are using the prescribed pain medication regularly as directed
2. Dehydration- if less than adequate oral fluids are taken by patient- make sure the patient is taking in adequate fluids--- the most common reason for fever post-op is dehydration! If the patient is not taking enough fluids by mouth, they may need to go to the hospital for IV fluids
3. Bleeding- there is and approximate 1-5% risk of developing bleeding from the throat or nose after surgery within the first 2 weeks after surgery. A little blood- tinged mucus or saliva is usually nothing to worry about, but you should call our office telephone (570) 714-3434 with any persistent bleeding or if you have any questions about the severity. If for some reason you are not able to reach the office phone, you should take the patient to the local emergency room for evaluation. For adults, you can try gargling (without drinking the water) with ice water, which usually helps resolve the bleeding. Occasionally the patient may have to be seen in the office or emergency room for treatment, and even more rarely, a procedure may need to be done in the operating room to stop the bleeding.
4. Bad breath for approximately 2 weeks
5. Speech/ articulation changes- usually from pain and healing process – this usually corrects itself within 2 weeks, but can take up to 2 months in rare cases
6. Escape of air or fluids through nose – usually extremely rare and mostly corrects itself within 2-3 months
7. Ear pain – usually referred pain from the tonsils – give the pain medicine as directed and try having the patient chew gum
8. Anesthesia risks- extremely rare, but we recommend you address any questions with the anesthesia team prior to surgery. You will meet with them on the day of surgery prior to undergoing surgery

## General Instructions (Before and after surgery)

1. **DO NOT GIVE THE PATIENT ANY ASPIRIN, MOTRIN, IBUPROFEN, OR OTHER NON-STEROIDAL ANTI-INFLAMMATORY MEDICATION FROM 1 WEEK BEFORE SURGERY THROUGH 2 WEEKS AFTER SURGERY BECAUSE THESE CAN MAKE THE BLOOD THIN AND INCREASE THE RISK OF BLEEDING DURING OR AFTER SURGERY!**
2. Do not give the patient any hard, sharp, or crispy foods for 2 weeks after surgery- this can lead to bleeding
3. Use cool mist humidifier in the bedroom at night for 2 weeks after surgery
4. If the patient is a child, it's usually recommended that they sleep with an adult for 10-14 days after surgery in case there is any bleeding that may present during the night
5. Avoid any acidic or spicy foods
6. Regular use, as opposed to as-needed use of the prescribed pain medication usually is more effective in controlling more severe pain
7. If the patient becomes sick prior to surgery, notify our office – surgery may need to be postponed