Rhinoplasty/Septoplasty Patient Instructions

Pre-operative instructions:

- Please discontinue the following medications two weeks before your planned procedure as they increase the risk of bleeding:
  o Aspirin or aspirin-containing products (Excedrin®, Alka-Seltzer®, Pepto-Bismol®)
  o Ibuprofen (Advil®, Motrin®)
  o Naproxen (Aleve®)
  o Vitamin E or other herbal supplements

You may safely use Tylenol for pain control if needed. Please notify Dr. Friedman’s office if you are currently taking warfarin (Coumadin®) or clopidogrel (Plavix®).

- If you use tobacco products, please refrain from using tobacco products and avoid exposure to secondhand smoke for at least six weeks prior to your procedure as tobacco products decrease the blood flow to the skin and may compromise the healing process.

- Do not eat or drink anything after midnight the night before your procedure.

Post-operative instructions:

Anesthesia Your procedure may be done under general anesthesia or local anesthesia with sedation. Either way, you will need to have someone drive you to and from the hospital on the day of your procedure. If you have general anesthesia, you may feel fatigued for a couple of days following the procedure.
**Nasal packs and dressings** After your procedure, you will most likely have flexible, plastic stents in place on each side of your septum. You may also have nasal packs in both nostrils. These will typically stay in place for one week and will be removed at your first follow-up appointment in the clinic. You may also have paper tape and a cast on the bridge of your nose that will also stay in place for a week. You may shower with the cast on, however, please take care to not get the cast wet. You may wear eyeglasses as long as your nasal cast is in place but will otherwise need to refrain from wearing eyeglasses for four weeks. You may wear contact lenses. If it is necessary that you wear your eyeglasses, please let us know and we can supply you with a device that will suspend your glasses and keep them from putting pressure on the nose. You will probably notice some bloody discharge from your nose for the first 24-48 hours after surgery. You may take a folded piece of gauze and tape it across your upper lip (moustache dressing) to catch the drainage if necessary.

**Swelling and bruising** There will be a moderate amount of swelling following your procedure. You should not drive if the swelling is obstructing your vision. You should attempt to ambulate as early as possible after the procedure since lying in bed can worsen the swelling. When lying down, it may be helpful to elevate the head of the bed for at least one week. The swelling will subside slowly each day with significant improvement at approximately two weeks post-op. Your nasal appearance will be distorted due to the swelling. Please be patient and remember that the swelling will continue to decrease for several months to one year following your procedure. The amount of bruising is variable from one individual to the next but some bruising should be expected. You may also experience alterations in your sensation, such as numbness, of the nose and surrounding areas. This is due to the disruption of the nerves during the procedure. This is temporary and should resolve over the next couple of weeks.

**Wound care** You will have incisions made inside the nose (intranasal) and may have a small incision on the outside of the nose (external) located on the vertical strip of tissue that separates the two nostrils (columella). These incisions will be closed with dissolvable sutures and there is no need for suture removal. You will be provided with a prescription for Bacitracin® or Bactroban® ointment and should apply this ointment to the inside of the nostrils twice daily for four weeks to prevent crusting and scarring. To apply the ointment, place a pea-sized amount of ointment to the pad of your thumb and simply swipe the ointment into the opening of the nostril to prevent from disrupting the surgical site. If there is an external incision, you should apply the ointment gently to that incision site using a Q-tip twice daily for two weeks. If you should develop crusting inside the nostrils or on the external incision site, please cleanse gently with soap and water and follow by gently applying half-strength hydrogen peroxide (hydrogen peroxide mixed half-and-half with water) to the area with a Q-tip twice daily. If you have an external incision, you should take extra care to avoid sun exposure.
until the wound is healed and then protect the incision site area with sunscreen as sun exposure can interfere with the healing process. Please complete these cares even with nasal stents or packs in place.

**Nasal hygiene** You will need to purchase an over the counter saline irrigation kit and should perform nasal irrigations three times daily for four weeks. Should you run out of the provided salt packets, you may purchase additional packets at your local pharmacy or mix your own saline solution by adding 1/8 teaspoon of table salt to 8 ounces of water. You will be given a prescription for Ocean spray® that should be used six times daily by applying six sprays per nostril. The saline irrigations and Ocean spray® will keep the nasal passages clean and moist to prevent crusting. Please perform the nasal hygiene cares even with packs in place as it is important to keep the packs moist. Do not blow your nose for one week following your procedure. You may then start to gently blow your nose after irrigating to remove crusts. Please be cautious not to push or pull on the nose when blowing.

**Activities** Again, please ambulate as soon as possible following your procedure to avoid swelling that is worsened from lying down and to prevent the formation of blood clots. You may return to your daily activities as soon as you feel you are capable, however, you should avoid heavy lifting or strenuous exercise for at least one week. You should refrain from participating in contact sports for at least six weeks in order to prevent nasal injury. Although it varies from one individual to the next, you will typically be able to return to work within 1-2 weeks following your procedure.

**Medications** In addition to prescriptions for Bacitracin® or Bactroban® and Ocean spray®, you will also receive prescriptions for narcotic pain medication and an antibiotic. You may use Tylenol® for mild discomfort. Again, please avoid any analgesics that may promote bleeding (see pre-op instructions). If Tylenol® does not adequately control your pain; you may utilize the prescription pain medication. Please note that the prescription pain medication is a Tylenol®-containing product and the maximum dose of Tylenol® is 4 grams (4000mg) in a 24-hour period. You should not drive while taking narcotic pain medication. You will be maintained on an antibiotic as long as your nasal stents or packs remain in place. This is to prevent a condition known as Toxic Shock Syndrome (TSS). Signs and symptoms of TSS include sudden high fever, vomiting, diarrhea and a rash, particularly on the palms and soles. Please remove your packs and contact Dr. Friedman’s office immediately at 215-829-5180 should these symptoms occur. If you need to reach us with an emergency when the office is closed, please go to the emergency room, or call the Pennsylvania Hospital operator at 215-829-3000 and ask to be connected to the ENT on-call physician. You should complete the entire course of the antibiotic you were prescribed. Eating yogurt with active cultures may minimize the likelihood of developing diarrhea. If you should develop diarrhea, please stop taking the antibiotic immediately and call Dr. Friedman’s office at 215-829-5180 or go to the emergency room if our office is closed.
**Complications** Please monitor for signs of infection including redness, worsening pain and tenderness to touch, an increase in swelling or purulent (pus) drainage from the incision site and notify Dr. Friedman’s office promptly at 215-829-5180.

**Follow-up appointment** You will have a follow-up appointment with Dr. Friedman or Dr. Friedman’s assistant approximately one week following your procedure to remove the nasal stents and cast. You will also have appointments scheduled 1 month, 3 months, 6 months, and 1 year following the surgery. If ear cartilage was used for your nasal reconstruction, you will have an additional appointment 1 to 3 days following surgery for removal of the ear dressing.