# **Health Facts for You**



# Caring for Your Child After Endoscopic Sinus Surgery

Endoscopic sinus surgery uses scopes through the nose to open sinuses that are blocked. Opening these natural drainage pathways helps prevent sinus blockage that can lead to chronic infections.

## **After Surgery**

After surgery, your child will have some material placed in the sinus cavities to help with proper healing. This will dissolve inside your child's nose.

Your child will have a little blood-tinged drainage from the nose. They may wear a small dressing under the nose. Doing too much activity too soon may increase the amount of drainage.

Your child may have a stuffy nose for a few weeks as the sinuses heal.

Pain differs in each child. Your child may have some achiness in the nose or sinuses.

Your child may feel sick to their stomach from the anesthesia. Start with clear liquids and move to solid food as your child is able.

Your child should sleep with their head on 2 to 3 pillows for the next week or so.

Cold packs to the nose and sinus areas may help with pain. Apply the pack every 3 or 4 hours for 20 to 30 minutes as needed. Give the pain medicine as prescribed by the surgeon. They work best if used during the first 48 hours.

Your child will take antibiotics to help prevent infection. If told to do so, use the steroid nasal spray to help decrease swelling. Use nasal saline mist or spray when told to do so by your doctor.

Your child should drink a lot of water and other fluids.

A humidifier at the bedside may help increase drainage from the sinuses. An ultrasonic or cool type is the best. Clean the machine often using the manufacturer's directions.

Your child will have a follow-up visit in about 4 weeks.

### **Limits after Surgery**

- No blowing the nose for 1-2 weeks. This could cause bleeding.
- No holding back sneezes. If your child sneezes, they should do so with their mouth open.
- No sports for 1-2 weeks. Your doctor will talk with you about when to resume normal activities and sports.
- If your child gets a bloody nose doing any activity, have them stop and rest.
- Your child may return to school when they feel ready, often within 2 to 3 days.
- No bending over or picking up heavy objects for 1 week.
- Do not give decongestants or antihistamines unless told to.
- Keep your child away from cigarette smoke and toxic fumes that may irritate the nose.
- No air travel for a few weeks. This avoids pressure changes and drying effects.

#### When to Call

- If the packing material comes out before it dissolves and you are concerned. No treatment is needed.
- Vision problems (loss of vision, double vision, eye pain).
- Neck stiffness (your child cannot touch their chin to the chest) along with fever, severe headache, and tiredness.
- Fever over 102° F.
- Severe bleeding from the nose.
- Pain **not** relieved by medicines.

#### Who to Call

Pediatric Otolaryngology (ENT) Clinic Weekdays, 8:30 am- 4:30 pm (608) 263-6420, option 3

After hours and weekends, this number will give you the paging operator. Ask for the ENT doctor on call. Give your name and phone number with the area code. The doctor will call you back.

The toll-free number is 1-800-323-8942.

If you are a patient receiving care at UnityPoint – Meriter, Swedish American or a health system outside of UW Health, please use the phone numbers provided in your discharge instructions for any questions or concerns.

Your health care team may have given you this information as part of your care. If so, please use it and call if you have any questions. If this information was not given to you as part of your care, please check with your doctor. This is not medical advice. This is not to be used for diagnosis or treatment of any medical condition. Because each person's health needs are different, you should talk with your doctor or others on your health care team when using this information. If you have an emergency, please call 911. Copyright ©11/2020. University of Wisconsin Hospitals and Clinics Authority. All rights reserved. Produced by the Department of Nursing. HF#6349.