

Home Care After Tonsillectomy and Adenoidectomy - Pediatric

Tonsillectomy is the removal of the tonsils. Adenoidectomy is the removal of the adenoids. Both surgeries may be done together or only one may be done.

General Information:

Your child may lack energy for several days, and may also be restless at night. This will improve over 3 to 4 days after an adenoidectomy, and 10 to 14 days after a tonsillectomy. Recovery from an adenoidectomy alone is easier than recovery from a tonsillectomy. It is quite common for your child to feel progressively worse during the first 5 to 6 days after surgery. Your child may also become constipated during this time for three reasons: he will not be eating his regular diet, he will be taking pain medications, and he may be less active.

Diet:

It is important for your child to drink plenty of fluids the first 3 days. Offer your child a drink every hour he/she is awake. Most children don't feel like eating after several days. This is alright as long as your child drinks lots of fluids. Signs that your child needs to drink more are when the urine is darker in color (urine should be pale yellow). A high fever that persists may also be a sign that your child is not taking in enough fluids. Please notify your doctor if your child refuses liquids during the post-operative period. As your child's appetite improves, solid foods and chewing should be strongly encouraged. There are no limits on the sort of foods your child can eat. You cannot damage the throat by giving any particular type of food. Let the child have whatever his/her favorite foods are to eat. Offer favorite liquids such as popsicles, slushes, and soft drinks.

Activity:

The child should rest at home for the first 48 hours. Activity may increase as strength returns. Generally children return to school approximately 10 days following a tonsillectomy; and about 3 days after an adenoidectomy. All children should avoid swimming and vigorous activity for 14 days after surgery.

Pain:

Throat and ear pain can be severe after a tonsillectomy. Give regular doses of pain medicine as often as every four hours. **NO** Aspirin or Ibuprofen products are to be given for 2 weeks after surgery. Chewing gum may be helpful in lessening muscle spasm and should be encouraged.

Bad Breath/Snoring:

Bad breath is very common due to the healing in the back of the throat. Your child may gargle with a mild salt water solution to improve the bad breath (1/2 teaspoon table salt to 8 oz. of warm tap water) and offer chewing gum. Most children breathe through the mouth and snore during the recovery period due to swelling. This may last between 2-3 weeks. It may be helped by propping up with pillows and using an ice collar. Turning on a humidifier at bedtime may lessen throat dryness caused by mouth breathing. Avoid over-the-counter mouthwashes (Cepacol, Scope, Listerine, etc.) - they tend to dry the throat and cause discomfort.

Bleeding:

There shouldn't be bleeding from the nose or mouth. We ask that you set your alarm and check the child at least once during the first night. If you see any bleeding at all, sit the child upright and phone your doctor. Swishing the mouth out with cold ice water may help stop the bleeding (rinse and spit over and over). Between 5 and 10 days after surgery, the white or grayish membrane (soft scab) breaks off in the back of the throat. A small amount of bloody mucus may be spit up. If this continues after a few minutes, please call the doctor. If you are unable to reach the doctor, please bring him/her to the emergency room.

Fever:

It is normal for a child to have a slight fever (99.0° to 101.0°) for the first few days following surgery. Good fluid intake and Tylenol will help keep the fever down. If the fever is over 101 degrees contact your doctor.

Nausea/Vomiting:

It is not unusual for the child to feel sick following a tonsillectomy. If vomiting persists into late evening you may want to contact the doctor for a medication to help the child feel better. If your child is still vomiting the day after surgery you need to notify the doctor.

What to Expect:

- a *hoarse* or *abnormal voice* may occur for several days
- *vomiting* may occur for up to 24 hours
- *snoring* may persist for 1-2 weeks
- *ear pain* may occur (the ears and tonsils share common nerves), but is temporary and requires no treatment
- *fever* up to 101 degrees
- *bad breath* is common for several days
- a gray or white *scab* or *crust* will form where the tonsils were and absorbs within about 2 weeks

Call the Doctor If:

- your child has persistent or excessive bleeding (go right to the nearest emergency room if severe)
- your child has inadequate food or beverage intake
- your child has fever 101.5 degrees or higher *despite* acetaminophen (Tylenol)
- your child develops a severe stiff neck
- your child has foul breath persisting (without signs of improvement) after 3-4 days
- your child seems to be getting worse-not better as the days go by

For Questions or Emergency Care:

Call the office at **662-327-4432** during business hours or after hours to get in touch with your doctor.