

WHAT IS SINUS SURGERY?

The surgeon passes a very small fibre optic instrument through the nose to visualise the sinus openings. The surgeon is able to correct causes of nasal obstruction with minimal surgery.

WHAT HAPPENS BEFORE SURGERY?

Certain diagnostic test may be organised prior to your surgery, if indicated, such as a CT scan, which will show the obstructed sinuses. Generally speaking, patients are admitted to the hospital on the day of surgery.

You will need to FAST (having nothing to eat or drink) at either 6.00am or 12.00 midnight, according to the time of your procedure.

HOW LONG WILL I BE IN HOSPITAL?

Usually patients having internal nasal surgery only have to stay overnight in hospital. You will be discharged home at approximately 10.00am the following day.

WHAT SORT OF ANAESTHETIC WILL I HAVE?

You will be given a general anaesthetic to put you to sleep.

Any questions you have about your anaesthetic will be answered prior to the operation by the anaesthetist.

We advise that you do not smoke at least one week prior to surgery to help prevent complications developing from your anaesthetic.

WHAT HAPPENS TO ME AFTER SURGERY?

- You will feel drowsy after the operation and may require some oxygen until fully awake.

- You may experience nausea and vomiting. The nursing staff will give you medication to control this.
- You may eat and drink once you are fully awake and alert which is usually about four hours following your return to the ward.
- In the mean time you will have an intravenous drip in your arm which will ensure you do not become dehydrated.
- You may feel some soreness as the anaesthetic wears off and you may need pain relieving medication. If you have any discomfort be sure to ask the nursing staff for some pain relieving medication.
- Antibiotics are prescribed following your operation. They are to be continued at home and we will provide you with antibiotics or a prescription will be given to you upon discharge.
- You may or may not have packs inside your nostrils. If you have packs, you may be slightly more uncomfortable due to the pressure and having a blocked nose.
- It is not uncommon to have a slight blood ooze from your nose after the operation. A piece of gauze will be placed below your nostrils to catch the ooze and will be changed by the nurse as needed.
- The morning after, following your operation, the doctor will remove the packs (if any) and you will be asked to rest in bed for an hour following, to minimise the risk of a blood nose.

WHAT WILL HAPPEN WHEN I GO HOME?

- The hospital requests that upon discharge you are escorted home by a family member or friend. It is not advisable for you to drive

- yourself, or to take public transport home.
- It is normal to have a blood stained discharge from your nose for a few days. To help clear crusting from your nose you should irrigate the nasal passages. To do this, place a one teaspoon of salt dissolved in boiling water and allow to cool. Dip a cotton ball in the salt water, tilt your head back and gently squeeze the cotton ball so that the water runs into your nose. Tilt your head forward and let the solution then run back out.

Activity Limitations

- On discharge it is important to minimise your level of activity and exercise to reduce the chance of bleeding. This is advised for at least 2-3 weeks post-op.
- Avoid any heavy lifting, bending or overexerting yourself for 2 weeks.
- Avoid blowing or picking nose (only dab nose with tissue to wipe away mucus).
- Avoid sneezing through the nose (keep mouth open and allow most of the pressure to go through the mouth).
- Avoid spicy foods.
- Avoid hot food and drinks, for example, tea/coffee.
- Avoid hot showers and saunas for 3 days.
- You will need to avoid sudden changes in air pressure, for example, no flying.
- You can expect some swelling of the nasal area, so sleep in a semi-upright position for at least 5 days.
- A full course of antibiotics will be required to minimise risk of wound infection.

Pain relief

Take Panadol / Panadeine as directed after discharge for minimal pain. You will be given a

supply of Panadeine Forte or a prescription for Panadeine Forte for severe pain if necessary.

DO NOT TAKE ASPIRIN / DISPRIN

Return to work

Usually you will require 1 to 2 weeks off work after this procedure. The doctor will advise you on a reasonable date for return to work, which sometimes depends on the type of work you do. If you require a medical certificate please ensure to obtain it prior to your discharge.

Follow-up

A follow-up appointment for review by the doctor will be made for you upon discharge from the ward. This will be one week later at the Outpatient Clinic.

WHEN TO CONTACT YOUR LOCAL DOCTOR OR THE DEPARTMENT OF E.N.T.

Contact or go and see your local doctor if you have:

- Increasing nose pain
- Persistent nausea and/or vomiting
- Persistent bleeding
- Offensive nasal discharge
- Fever
- Blurred vision

If nose bleed occurs sit upright and place a bag of frozen food (eg. peas) or a bag of ice on your forehead and the back of your neck and hold for 15 minutes. If bleeding does not stop contact your local doctor.

In the case of an emergency you may contact the Emergency Department on Ph:2160 0000.

Please do not hesitate to contact the nursing staff

in the Ward (24 hours a day) if you have any questions or concerns. Ph: 2160 0000.

WHAT TO BRING INTO HOSPITAL

- Make sure to remember to bring in all your x-rays and any medications you may normally take each day.
- Please ensure that all jewellery and make-up or nail polish, if applicable, is removed prior to your admission.
- Please bring a change of clothes, pyjamas, slippers, dressing gown and all personal toiletries you will require whilst in hospital.

PLEASE USE THE SPACE BELOW TO WRITE DOWN ANY QUESTIONS YOU WOULD LIKE TO ASK

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PRINCE COURT MEDICAL CENTRE

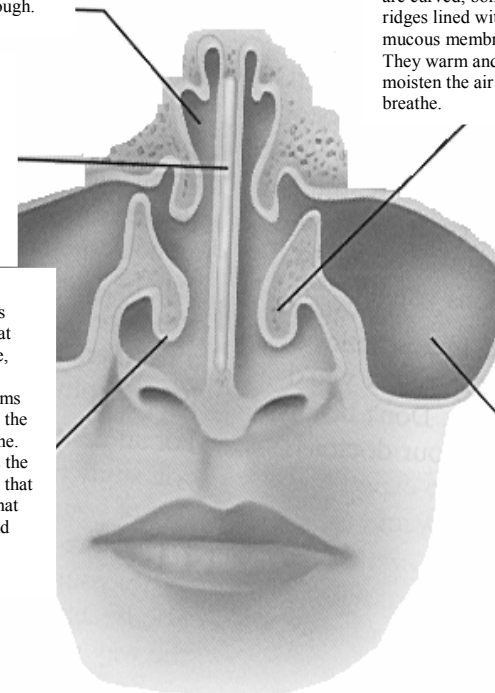
A GUIDE FOR PATIENTS HAVING SINUS SURGERY

The nasal cavity is a hollow space behind the nose that air flows through.

The turbinates on each side of the nose are curved, bony ridges lined with mucous membrane. They warm and moisten the air you breathe.

The septum is a thin 'wall' made of cartilage and bone. It divides the inside of the nose into two chambers.

The mucous membrane is thin tissue that lines the nose, sinuses, and throat. It warms and moistens the air you breathe. It also makes the sticky mucus that helps clean that air of dust and other small particles.



This pamphlet is a guide and is no substitute for a full and open discussion of the risks and benefits of the proposed procedure, these should be discussed with your doctor. The specific details of your care may vary from the matters discussed in this guide.

PLEASE BRING THIS PAMPHLET WITH YOU ON YOUR ADMISSION TO THE HOSPITAL