

Post-operative Instructions Following Septoplasty

General:

Septoplasty is performed as an outpatient procedure. If you have other medical conditions such as sleep apnea, you may spend one night in the hospital after your procedure. You will have absorbable sutures placed to close the incision in the septum. Often, silicone splints are placed to help with healing and minimize scar tissue formation. The nose may be congested or obstructed in the first few to several days following septoplasty. This is relieved with saline rinses (see Nasal Care following the Surgery below). Mild bloody nasal discharge is expected in the first 48 hours.

Before Surgery:

Three days before surgery begin applying bactroban ointment (mupirocin) inside the nostril twice a day. This ointment will be prescribed by Dr. Zimm.

Diet:

You may have liquids by mouth once you have awakened from anesthesia. If you tolerate the liquids without significant nausea or vomiting then you may take solid foods without restrictions. If nausea is persistent, an anti-nausea medication may be prescribed for you. Some patients experience a mild sore throat for 2-3 days following the procedure. This usually does not interfere with swallowing.

Pain control:

Patients report minimal to mild nasal pain, congestion, and occasionally a headache for a few to several days following septoplasty. This is usually well controlled with prescription strength oral pain medications (Vicodin, Tylenol #3, Ultracet). Please take the pain medication prescribed by your surgeon when needed.

You should avoid non-steroidal anti-inflammatory drugs (NSAIDs) such as aspirin, ibuprofen, naproxen (Excedrin, Motrin, Naprosyn, Advil) because these drugs are mild blood thinners and will increase your chances of having a post-operative nose bleed. Please contact our office (212) 327-4600 if your pain is not controlled with your prescription pain medication.

Activity:

No heavy lifting or straining for 2 weeks following the surgery. Do not blow your nose after the surgery until otherwise instructed by Dr. Zimm. If you have to sneeze, do so with your mouth open.

You should plan for 1 week away from work. If your job requires manual labor, lifting or straining then you should be out of work for 2 weeks or limited to light duty until the 2 week mark. Walking and other light activities are encouraged after the first 24 hours.

Nasal care following the surgery:

Gently apply a layer of antibiotic ointment to the nostrils twice daily for the first week. Hot steam showers are very helpful in relieving nasal congestion and crusting. Sleep with the head elevated for the first 48 hours; this will minimize pain and congestion. Cool compresses also may help with pain and congestion.

Avoid placing anything frozen directly on the skin. You may use two pillows to do this or sleep in a reclining chair. Dr. Zimm may have you spray your nose with decongestant spray (Afrin or neosynepherine) as needed for persistent nasal congestion and oozing.

Follow-up appointment:

Your follow up appointment in the office will be 6-7 days following your surgery. At this time, Dr. Zimm will remove your nasal silicone splints. You will breathe better once these have been removed. This visit should be scheduled prior to your surgery (at the time of your pre-operative visit). If you do not have the appointment made, please contact our office when you arrive home from the hospital.

Please call our office immediately if you experience:

***Brisk nose bleeding**

***Fever greater than 101.5 degrees Fahrenheit**

***Purulent discharge (pus) coming from the nose**

***Severe nasal pain or headache**