



Patient & Family Guide

2024

Nose Surgery



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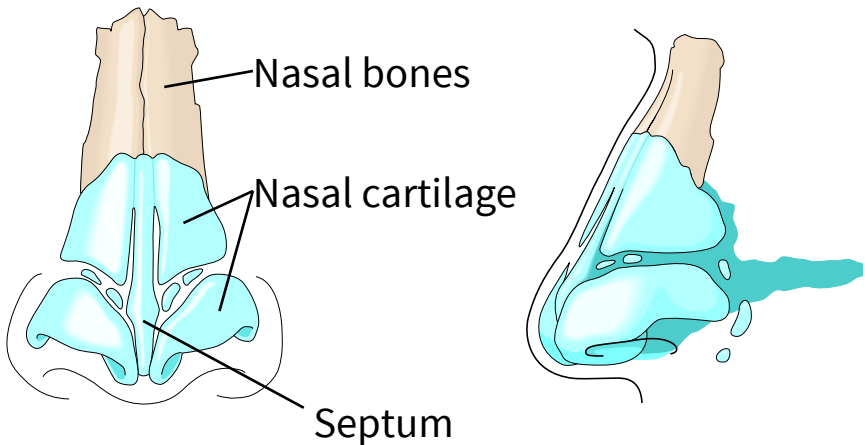
Types of nose surgery

Septoplasty

- › Fixes a deviation (bend) of the nasal septum to relieve a nasal blockage (blocked nose) or to help sinus drainage

Septorhinoplasty

- › Changes the shape of the nose for cosmetic reasons or to fix an injury
- › You may need a plaster cast for about 7 days



Right after surgery

- You may have packing in your nose.
- You will have a small dressing under your nose called a “drip pad” or a “moustache dressing”. This will be changed often.
 - › It is common to have a bit of blood on your drip pad.
- Your nose may be swollen.
- Sleep with your head raised up on pillows. This helps to lower swelling and helps you breathe easier.
- You may have some pain. You will be given pain medication every 4 hours, as needed.
 - › If you need pain medication, ask your nurse.
- You may place a cold pack (bag of ice) on your eyes to help with swelling and discomfort.
- You may have swallowed blood during or after your surgery. This may cause you to vomit (throw up) old blood. If you feel sick to your stomach, ask your nurse for medication.
- You may have bad breath and a taste in your mouth caused by bleeding, post-nasal drip, and breathing through your mouth. Brushing your teeth and using mouthwash will help.

- Your intravenous (I.V.) will be removed when you are drinking enough and not feeling sick to your stomach.
- **Ring the call bell for your nurse to help you get up the first time.** You may still be drowsy.
- If you have packing in your nose, it will be removed 24 to 48 hours (1 to 2 days) after your surgery. You will lie down for 1 hour after the packing is removed. If you do not have bleeding after 1 hour, you will be able to leave the hospital.
- Put Vaseline® ointment on both nostrils 2 times a day for the first 7 days (1 week) after surgery.
- Use a saline (salt water) nasal spray 3 to 4 times a day for at least 7 days after surgery.
- If you have nasal splints, we will give you an appointment to have them removed. This is usually 1 to 2 weeks after surgery.

At home

Safety

- **You must have a responsible adult to:**
 - › take you home after surgery. You cannot drive yourself, or take a taxi or a bus home alone.
 - › stay with you for the first night after surgery.
- Ask your doctor when you can go back to work or school.

Pain and discomfort

- **Do not** take ASA, acetylsalicylic acid (Aspirin[®]), ibuprofen (Advil[®]), or similar medications.
- You may take your regular medications.
- If you have pain or discomfort, you may take Tylenol[®] according to the package directions. Tylenol[®] will help your other medications to work, and may lower the doses (amounts) you need.
- Your doctor may give you a prescription for pain medication. **Do not drink alcohol while taking pain medication.**



For 2 days after surgery:

- › **Do not** drive.

For 2 weeks after surgery:

- › **Do not** lift more than 5 pounds (2.26 kg).
- › **Do not** hurt or injure your nose.
- › **Do not** pick or rub your nose.
- › **Do not** blow your nose for 7 to 10 days after surgery.
- › **Do not** let your nose get too dry.
- › **Do not** get too hot (like from the sun or a hot bath).
- › Try not to strain while going to the bathroom. Talk to your doctor or pharmacist about using a stool softener if you are constipated (cannot poop easily).
- › Sneeze or cough with your mouth open.

Tips:

- Use Vaseline® ointment more often if you have severe (very bad) crusting or if your nose is blocked.
- Only use a nasal spray if it is prescribed by your doctor. Start using it gently the day after surgery, or as told by your doctor.
- Get lots of rest.
- Drink lots of fluids.

Call your primary health care provider (family doctor or nurse practitioner) if you have:

- › A lot of pain or tenderness that does not go away
- › Fever (temperature above 38 °C or 100.4 °F)

If you have slight bleeding from your nose, sit comfortably and lean forward. Firmly press both nostrils together and hold for 5 to 7 minutes. It may help to put a cold compress over your forehead.

If the bleeding does not stop, go to the nearest Emergency Department right away.

Notes:

This pamphlet is for educational purposes only. It is not intended to replace the advice or professional judgment of a health care provider. The information may not apply to all situations. If you have any questions, please ask your health care provider.

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