

SAN FRANCISCO OTOLARYNGOLOGY

Providing ear, nose, and throat care since 1940

DIET

FIRST DAY

Avoid hot and highly seasoned foods.

Encourage intake by frequently offering milk, ice cream, water, fruit juices, jello, broth, etc.

SECOND DAY

Drink several glasses of water (lukewarm water is less irritating than cold)

Add soft foods as desired (jello, chocolate pudding, mashed potato, pureed vegetables, cottage cheese, etc.)

THIRD to FIFTH DAY

Gradually resume normal diet but avoid hot foods, spicy or highly seasoned foods, potato chips, nuts, dry toast, pop corn and crackers until 1 to 2 weeks after surgery

MEDICATIONS

An antibiotic is usually prescribed for seven to ten days following the surgery. The patient also receives a prescription for pain killers in the form of codeine or hydrocodone. These products cause somnolence, drowsiness and constipation. Occasionally, if the patient vomits, phenegan suppositories may be necessary.

GENERAL INSTRUCTIONS

- Children should be kept indoors and relatively quiet for the first 3 days
- Frequent coughing and clearing the throat should be avoided
- Objectionable mouth odor is commonly observed and is relieved by abundant fluid intake
- A white or gray membrane on the sides of the throat is normal and should disappear in 1 to 2 weeks
- Earache is expected. It is not an ear infection, it is referred from the throat
- Occasionally, a transient neck stiffness may occur in children following adenoidectomy
- Patient may return to school or work 1 week after discharge. Please note that painkillers cause drowsiness. Patients who take painkillers should not operate machinery, drive or make important decisions
- Do not use aspirin for 2 weeks; it increases the possibility of bleeding
- Avoid drinking orange juice, grapefruit juice, and tomato juice for 1 week after the operation, they make the throat burn

FEVER

Most children experience a low grade temperature. This is caused by dehydration. Encourage fluid intake and if needed, use TYLENOL (NOT ASPIRIN). If the temperature remains above

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102.2 (39.0 Celsius) and does not respond to Tylenol, or if the child refuses to drink, then IV fluids are required. Please call our office or the closest emergency room.

BLEEDING

The danger of serious bleeding is over after you leave the hospital. In about 2% of patients there is some bleeding after 6 or 8 days. If this happens to you, do not become excited, for this bleeding is usually slight and stops spontaneously. Remain quiet, lie down, and spit the blood out gently. Gargle the throat gently with ice water and stay quiet. If the bleeding does not stop promptly, call your doctor. If the doctor is not available and bleeding continues, go to the nearest emergency room.

To reach the doctor:

1. For urgent or routine questions call the doctor's answering service by dialing (415) 362.5443 then press "7".

If for any reason you are unable to reach the doctor, please go to your nearest emergency room.

In San Francisco:

UCSF Emergency Room
505 Parnassus Ave.
(415) 353.1037

CPMC Emergency Room
Pacific Campus
2333 Buchanan St.
(415) 600.6000

San Francisco General Hospital
1001 Potrero Ave.
(415) 206.8111