



Pediatric Tonsillectomy and/or Adenoidectomy

Removal of the tonsils and/or adenoids is one of the most frequently performed operations performed in the United States. It has proven to be a safe, effective surgical method to resolve breathing obstruction, throat infections, and to help manage recurrent ear infections.

Pain following surgery is an unpleasant side effect. All attempts are made to reasonably control the pain with medications. Most of the time, ibuprofen and acetaminophen are used. Occasionally, a dose of a steroid or a narcotic medication are also given to help with pain control.

The risks of surgery on the tonsils and adenoids include the general risks of anesthesia, infections such as pneumonia, and bleeding. Post operative bleeding occurs in about 2% of cases, and it can occur at any time during the first two weeks after surgery. It is impossible to predict who will have a bleeding complication. If it happens, it is imperative to call the office or the on call provider for advice. Alternatively, you can go straight to the emergency room for evaluation.

Treatment of a bleeding complication is usually done in the office, but sometimes requires returning to the operating room and going back under general anesthesia. In extremely rare cases, a blood transfusion may be recommended.

Because swallowing is painful after surgery, there may be poor oral intake of fluids. If this cannot be corrected at home, the patient may need to go to an urgent care or emergency room to have an intravenous line inserted and fluids administered for rehydration. Very rarely, disturbances in the sense of taste or loss of taste in one side of the tongue may take place. This is almost always temporary.

Post-operative Tips

1. Keep your child hydrated! Put much more emphasis on drinking than eating. Avoid citrus drinks (ex. orange, lemon, and grapefruit) during this time, as the acidic nature will be very uncomfortable. Getting dehydrated significantly intensifies the pain and makes it harder to keep on top of pain control. A good sign of dehydration is a decrease in urination frequency.
2. It is worthwhile using the pain medicine on a regular schedule every 4-6 hours for the first few days. Getting 'behind' on pain medications makes it much more difficult to 'catch up' on pain control.
3. Avoid hard or sharp foods such as chips, crackers, and firm bread. Good alternatives include applesauce, yogurt, and pastas. Make sure the food isn't too hot, as your child's throat may not detect high temperatures as well.

4. Low grade fevers are common following throat surgery. If your child has a fever greater than 101.5°, you should contact your doctor's office or proceed to an emergency room. If your child appears unusually confused or overly lethargic it may be a sign of other problems, and you should contact our office or go to an emergency room. The medicine given during surgery can make your child sleepy, lightheaded, or experience temporary memory loss. These symptoms should slowly wear off during the first 24 hours.
5. Pay attention to your child's breathing while they sleep. Check in on your child a few times to make sure they are breathing easily, especially the first night.
6. Surgery in the throat can be quite painful. Additionally, it is not uncommon to also have associated pain in the ears, jaw, or even neck area.
7. Another typical side effect is bad breath. This is because a scab is forming in your throat, just as it would on an elbow or knee. However, this scab is constantly wet and warm, which has a tendency to make it smell bad. Fortunately, it is not a sign of infection, but just normal healing.
8. It is not uncommon to spit up **small** amounts of blood on the day of surgery or even the day after surgery. This can also occur on days 10-14. However, if your child develops significant amounts of bleeding you need to contact our office or go to an Emergency Room immediately. Significant bleeding includes: constantly spitting bright red blood, vomiting dark brown or red liquids, or any other bleeding that concerns you.
9. Recovery can take up to three weeks, although by day 10-12 most patients have started to turn the corner and are feeling better. There are no absolute restrictions on when to return to daycare or school.
10. In addition to the pain medication prescribed, other measures which will help control discomfort include:
 - a. Drinking cool liquids
 - b. Ice packs to the outside of the neck (can substitute frozen bags of vegetables, berries, etc.)
 - c. Especially in children, distractive techniques can be effective, such as with games, movies, and computer play.

