

tonsillectomy

why does my child need a tonsillectomy?

The main reasons to have a tonsillectomy include:

- Enlarged tonsil size that causes snoring and problems sleeping
- Frequent throat infections

before surgery

No aspirin medications (including Pepto Bismol), ibuprofen medication (Advil, Motrin), anti-inflammatory medications (Aleve, Naprosyn) or products containing Gingko Biloba, or St. John's Wort should be given for 2 weeks before surgery. None of these medications or products should be given for 2 weeks after surgery, except ibuprofen (Advil, Motrin) and acetaminophen (Tylenol). Ibuprofen and acetaminophen have no restrictions after surgery.

Please let the office nurse know if there is a family history of bleeding tendencies or your child tends to bruise easily.

the surgery

The tonsillectomy will be performed under general anesthesia either as an outpatient or with overnight observation. The surgery usually lasts 10-20 minutes. Children stay in the hospital for up to four hours or overnight for observation.

after surgery

Your child will have some discomfort and pain in his throat, jaw, ears, neck or mouth. The pain may be moderate to severe. Your child may have bad breath, snore and his voice may sound different or may be hoarse, raspy, or have a nasal sound.

- Place an ice collar around the front of your child's neck to help with pain.
- A humidifier placed in your child's room will help keep the air moist. This may help with your child's pain.
- Make sure your child drinks throughout the day. They should drink at least 3-4 ounces (half cup) of any fluid they can tolerate (except red drinks) to stay hydrated. It will be uncomfortable, so you will need to work with your child to get them to drink.

nausea and vomiting

Some children have nausea and vomiting from the general anesthetic. This should stop within a few hours. Please call the office nurse if nausea and vomiting continue for more than 12-24 hours.



pain control

Acetaminophen (Tylenol) and ibuprofen (Advil, Motrin) are used for pain control after surgery. For children who will not take liquid pain medication, acetaminophen (Tylenol) also comes in an orally disintegrating table or a rectal suppository. You should alternate acetaminophen and ibuprofen every three hours to control pain. For children 12 years of age and older, prescription pain medication may be given as well. If so, give as directed. If you have any questions about pain medication instructions, please ask the office nurse.

oxycodone/roxicodone

Some children continue to have pain even though they are taking acetaminophen and ibuprofen. For children 12 years and older having tonsils removed, the doctor may give another medicine called oxycodone/roxicodone. Here are some guidelines to follow for this medicine:

- Children given this medicine may not begin using it until the day after surgery.
- Give first dose during daytime hours and watch for four hours for any changes in breathing (slowing of breathing rate).
- If your child is sleepy or hard to wake up, **do not** use this medicine and call the office.
- Only give this medicine if the acetaminophen and ibuprofen do not help your child's pain (severe breakthrough pain)

activities

Your child needs rest after surgery. Quiet activities are best for 14 days. Your child should not plan to go to school for at least 7-10 days. Scabs will still be present around day 14, so if they go back to school before that, there should be no recess gym or organized sports until 14 days after surgery.

follow-up

If your doctor recommends an appointment 4-6 weeks after surgery, please call the office soon after surgery to schedule it. The doctor may choose to have a nurse call for a post-surgery check instead of coming to the office. This call will be placed 4-6 weeks after surgery. If an appointment is needed after speaking with the nurse, the nurse will let you know that and will schedule the appointment.

when to call the doctor

Call the ENT office at 937-641-4647, option 3 if your child has any of the following:

- Fever over 102°F
- Nausea/vomiting that continues past the first day after surgery
- Unable to drink
- Urine is dark

This handout is for general information only and should not be considered complete. For more specific information, please ask your child's health care provider. You can also call the Pediatric ENT team at 937-641-4647.

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