

Tonsillectomy with or without Adenoidectomy

What is it? The tonsils are sometimes removed to treat recurrent bacterial tonsil infections or obstructive sleep disturbances. Depending on the situation, the adenoids are frequently removed at the same time.

About the anesthetic: This procedure is performed in the operating room with the patient asleep (general anesthetic). In young children, the child is allowed to breathe anesthetic gas out of a mask until they fall asleep (this usually takes less than 30 seconds), then an IV catheter is placed and a breathing tube is placed in the throat. Some sedation is sometimes given prior to going to the operating room if the child has a lot of anxiety or will not easily separate from the parents. In older children, the IV catheter may be placed prior to the child going to sleep at the discretion of the anesthesiologist. A member of the anesthesia department administers all anesthetics, and all of the routine monitoring equipment is used to assure safety. You will meet with a member of the anesthesia department prior to going to the OR and they will give you more details about the anesthetic and talk to you about risks. Parents should remain in the waiting room while the child is in the operating room. Your doctor will talk to you after the procedure is finished.

About the surgery: The tonsils and adenoids are removed through the mouth...there are no incisions on the face or neck. The operation usually takes less than thirty minutes. After the procedure, the child is allowed to awaken and is monitored in the recovery room for about an hour. After this, the child may be monitored in the day hospital area. Parents are not allowed in the operating room or the recovery room. However, you are encouraged to stay with your child in the day hospital area. Most children can be discharged to home on the same day as surgery. However, very young children (less than 3 years), children with other medical problems, and children who have excessive nausea following surgery may require overnight observation in the hospital...this will be at the discretion of your doctor.

What about bleeding? There is usually very little bleeding during the surgical procedure. However, bleeding is the most common complication we see in the days following surgery. This will happen in about 4 children out of a hundred who have their tonsils removed. The most common time for bleeding is 7 to 10 days after surgery. Any bleeding should be taken seriously, and you should immediately contact the ENT clinic during normal working hours or call the hospital operator and ask for the ENT doctor on call if bleeding occurs after hours or on the weekend. If your child does have some bleeding, he/she will need to be examined by a physician and your child may have to return to the operating room to treat the bleeding.

What can my child eat and drink after surgery? The worst part of having your tonsils removed is the sore throat, which usually lasts for a week or so. The sore throat can be quite severe and can make drinking and eating quite difficult. We encourage the child to stay on a soft diet for a full two weeks after surgery. The primary goal in the first few days after surgery is to keep the patient hydrated. You should frequently encourage the child to drink liquids throughout the day. Any liquid is good and can even be in the form of a popsicle. However, use caution if the child drinks milk or other dairy products (ice cream) as this can thicken oral secretions making swallowing difficult. Also avoid citrus juices (orange, grapefruit, lemonade) as these can sting the throat. A soft diet can be introduced as soon as the child wants it...even the same day as surgery. But remember, **hydration** is the key to success after surgery.

Pain management: We do the best we can to manage the sore throat after tonsillectomy. But despite our best efforts, we cannot take away all of the pain. Time and healing will cure the pain. The goal of pain management is to take the edge off of the pain so the child can swallow. An antibiotic is usually prescribed after surgery. This helps decrease the amount of bacterial in the throat, which, in turn, decreases pain. We encourage scheduled use of liquid acetaminophen (Tylenol) for several days after surgery. A narcotic pain medicine may also be prescribed to aid in pain management. However, recent studies have shown that routine use of plain

acetaminophen should be just as effective as some narcotics at managing postoperative pain. Narcotic pain medicine is may also cause a sore stomach and sedation. Do not use aspirin or Ibuprofen products (Motrin) to treat pain as these may increase the likelihood of bleeding.

What if my child won't drink? We expect that your child will not be able to drink the normal amount of liquid for several days after surgery. It is not uncommon for the patient to lose a few pounds after surgery; don't worry, it will come back. However, if your child goes for a prolonged period of time without drinking, he/she can become dehydrated. Clues to presence of dehydration are lack of adequate urination, dry mouth, and sunken eyes. If you suspect dehydration, please call the doctor. Some cases of dehydration require re-admission to the hospital for intravenous fluid replacement.

When can my child resume normal activity? We expect a child to remain at home with a responsible family member for a week after surgery. Some children require slightly more than a week to recover from surgery. Patients should refrain from vigorous physical activity for two weeks after surgery.

Fever: It is not uncommon for a child to have a low grade fever for the first few days after tonsillectomy. This should be managed with acetaminophen. However, prolonged fevers unresponsive to acetaminophen or fevers over 101.5 should be reported to your doctor. If fever is accompanied by a stiff neck, this should always be reported to your doctor.

What about complications? The most common complication following tonsillectomy is bleeding. It is not uncommon for the child to have a change in the quality of the voice immediately after surgery; this should correct in a short period of time. Infection is extremely uncommon after tonsillectomy.