

Patient Information Leaflet

THE
MEDICAL
SPECIALIST
GROUP
LLP

Day Case Tonsillectomy (+/- Adenoidectomy)

THE MEDICAL SPECIALIST GROUP LLP
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Discharge advice following Tonsillectomy (+/- Adenoidectomy) as a Day Case

1. The first 24 hours

You will be contacted by telephone by a nurse on the morning following your operation, probably around 10.00am, to enquire about your recovery and progress.

If for any reason you feel unwell overnight, please telephone the hospital (725241) and ask to speak to either Giffard Ward (ext. 4283) or Victoria Wing (ext. 4363) as appropriate.

The Nurse-in-Charge will make an assessment of your condition and may ask you to come to the hospital to spend the rest of the night on the ward for further assessment; if necessary, the on-call Ear, Nose and Throat Surgeon will be contacted.

You may be admitted if you are experiencing bleeding, pain which is not relieved by take-home medication, persistent nausea or vomiting.

2. The following two weeks

The major potential problems in the first few days after the operation are bleeding and infection, both of which can occur up to 10 to 14 days after the operation.

The incidence of bleeding is less than 5% and the following advice will minimise the risk of this happening:

a) Work/Further Education

You will be provided with a certificate signing you off work for two weeks; it is usual to return to work after this period.

b) Exercise

Avoid strenuous activities, e.g. Lifting, running, swimming; walking should be fine.

c) Socialising

For the first 10 days, avoid crowded places and contact with people who may be carrying infections.

d) Eating/Diet

Frequent swallowing and eating mildly abrasive foods keep the tonsil beds clean and encourage healing, while discouraging infection; so eat your normal diet from the outset, e.g. Cereals and toast for breakfast, sandwiches for lunch, etc.

While abrasive foods are not necessary per se, avoid the temptation to just have soft foods or liquids; take pain-relief tablets before eating if necessary; avoid foods/drinks that may sting, e.g. orange juice.

Chewing gum is very good as it encourages regular chewing and frequent swallowing.

e) Oral Hygiene

Continue your usual regular oral hygiene, i.e. brushing teeth; special antiseptic gargles are not necessary.

f) Pain Relief

Take regular analgesia— Paracetamol, Ibuprofen or Codeine; use Difflam oral spray or gargles as advised.

g) Delayed-onset Pain

Discomfort on swallowing is usually worse a few days after, rather than immediately after, the operation; take regular pain-relief during the day and eat small amounts regularly until the discomfort settles down.

h) Tonsil Bed Appearance

The tonsil bed has a white appearance after the operation; this does not represent infection and does not require any antibiotics; it will settle down quickly with normal eating and healing.

i) Post-Op Infection and Bleeding

Increased pain in the throat or ears at about day 7 to 10, usually with a low grade temperature and smelly breath, is a sign of infection and will usually require oral antibiotics from your General Practitioner.

Rarely, but importantly, some bleeding may result and this requires immediate re-admission to hospital for assessment and intravenous antibiotics for 24 hours; this is rarely serious, despite its apparently dramatic onset.

j) Follow-Up

Healing after Tonsillectomy is usually straightforward and a Post-Op check-up appointment is not normally required.

If you have any problems or questions in the first two weeks after the operation, please contact your consultant's secretary at the Medical Specialist Group LLP during office hours (238565) or contact your General Practitioner.

The Ear, Nose & Throat Consultant Surgeons at the Medical Specialist Group LLP are:

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