

Patient Information Leaflet

THE
MEDICAL
SPECIALIST
GROUP
LLP

In-Patient Tonsillectomy (+/- Adenoidectomy)

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Discharge advice following Tonsillectomy (+/- Adenoidectomy) as an In-Patient

The major potential problems in the first few post-operative days or weeks are bleeding and infection—both of which can occur up to 10 to 14 days after the operation.

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

1. Return to School/Work

No school or work for at least 10 days; a return to school on day 10 should be possible if feeling well, but it may be three weeks before adults feel well enough to return to work.

2. Exercise

Avoid strenuous activities, e.g. lifting; walking should be fine.

3. Socialising

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

4. 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.

Tempt your child with anything they particularly like, to encourage them to eat and swallow, e.g. crisps, chips, pizza, etc. Chewing gum is very good as it encourages regular chewing and frequent swallowing.

5. Oral Hygiene

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

6. Pain Relief

Younger children usually require Paracetamol or Calpol and should be given this at regular intervals during the first few days.

Older children usually require regular longer-acting pain-relief, such as Brufen, and additional regular Paracetamol.

Adolescents and adults should take regular longer-acting pain-relief, such as dispersible Voltarol, with additional dispersible Cocodamol and Diffiam oral spray or gargles as needed.

7. Delayed-onset Pain

Occasionally the pain may be worse a few days after the operation than immediately afterwards, often because of early difficulties with eating.

Take regular pain-relief during the day and eat only small but frequent amounts until the discomfort settles down.

8. Tonsil Bed Appearance

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

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

10. 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 phone the hospital (725241) and speak to the ward on which you were an In-Patient; they will either advise you over the phone or contact your specialist for you.

**The Ear, Nose & Throat Consultant Surgeons at the Medical
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