



Adenoidectomy

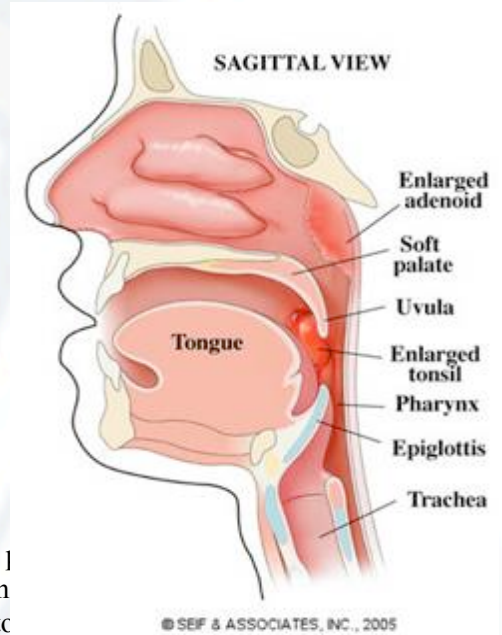
The adenoids are lymphatic tissue in the back of the nose similar to tonsils. They are high in the throat behind the nose and roof of the mouth and are not visible without using special instruments or x-rays. They act as a filter to the particles we inhale. They are part of the immune system, but they do not serve a critical function. Removal does not cause any immune deficiency. However, occasionally adenoids become more of a liability than an asset. When adenoids become enlarged, they may cause mouth breathing, snoring, bad breath, and runny nose. They may also obstruct the Eustachian tube which drains the ear, leading to ear infections or fluid in the ear. Sinus infections in young children are often due to adenoids, and adenoidectomy will resolve sinus issues in approximately two-thirds of children.

INDICATIONS FOR ADENOIDECTOMY

Adenoids are removed for several reasons. These include the following: nasal obstruction and mouth breathing, snoring and sleep apnea, recurrent or chronic sinus infections, or recurrent ear infections or fluid.

PREPARING YOUR CHILD FOR SURGERY

- Talk to your child about their feelings and provide reassurance
- Encourage the idea that the procedure will make them healthier
- Reassure your child that the operation does not remove any important part of the face; she will not look any different on the outside as there will be no external scars
- There will be no food or drink allowed after midnight the night prior to surgery; no gum or using mouthwash, lozenges, water or excessive amounts of toothpaste



HOME CARE INSTRUCTIONS

- You may give Motrin (ibuprofen) as needed for pain and inflammation and discomfort.
- Be sure your child gets proper rest. Your child may feel worn out and tired for a while.
- Because of the sore throat and swelling, your child's appetite may be poor. Soft and cold foods such as ice cream, popsicles, and cold drinks are usually tolerated the best
- There are no specific dietary restrictions
- Avoid mouthwashes and gargles following surgery
- Avoid exposing your child to people with upper respiratory infections, such as colds and sore throats

WHAT TO EXPECT AFTER ADENOIDECTOMY AND COMPLICATIONS

- Your child will be in mild discomfort for a few days. Most children can return to school after 1-3 days
- Ear pain is very common and normal; it is not an ear infection
- Temporary bad breath and nasal congestion is normal and will resolve
- Low grade fevers are very common; call if fever goes above 101.5F and does not go down with Motrin.
- Slight voice change is very common, but significant permanent voice change or changes to the shape of the throat are very rare (less than 1 in 2,000)
- Mild bloody drainage from the nose is common, but significant bleeding is very rare
- Serious anesthetic complications are very rare (1 in 20,000)
- Very rarely, a child will not get maximal benefit from the surgery, and some symptoms may persist, usually in a milder fashion

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