

# **Lake County ENT/Head & Neck Specialists**

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## **Turbinate Reduction -Turbinate Submucous Resection Postoperative Instructions**

**General:** Inferior turbinates are long, sausage shaped structures that are composed of a ridge of bone lined with thick, well-vascularized soft tissue and covered by a moist mucous membrane. These structures warm, filter and humidify the air inspired through the nose. When irreversibly enlarged, reduction in the size of inferior turbinates may be necessary. Inferior turbinate reduction is performed as an outpatient procedure.

**You should avoid non-steroidal anti-inflammatory drugs (NSAIDS) such as aspirin, ibuprofen, naproxen (Excedrin, Motrin, Naprosyn, Advil) for 10 days prior to surgery.** These drugs are mild blood thinners and will increase your chances of bleeding.

**Diet:** You may have liquids by mouth once you have awakened from anesthesia. If you tolerate the liquids without significant nausea or vomiting then you may take solid foods without restrictions.

**Pain control:** Patients report mild nasal pain and congestion a few to several days following turbinate surgery. This is usually well controlled with prescription strength oral pain medications (Vicodin). You should avoid non-steroidal anti-inflammatory drugs (NSAIDS) such as aspirin, ibuprofen, naproxen (Excedrin, Motrin, Naprosyn, Advil) for two weeks after surgery.

**Activity:** No heavy lifting or straining for 2 weeks following the surgery. You should plan for 2-3 days away from work. If your job requires manual labor, lifting or straining then you should be out of work for 2 weeks or limited to light duty until the 2 week mark. Walking and other light activities are encouraged after the first 24 hours.

**Nasal care following the surgery:** Rinse the nose 3 times daily with saline solution beginning the day after surgery. This can be accomplished with a Neil-Med Sinus Rinse bottle (available over the counter at most pharmacies) or a Netti-Pot. Gently apply a layer of antibiotic ointment to the nostrils twice daily for the first week. Sleep with the head elevated for the first 48 hours; this will minimize pain and congestion. You may use two pillows to do this or sleep in a reclining chair. Your surgeon may have you spray your nose with decongestant spray such as oxymetazoline (Afrin Nasal Spray) as needed for persistent nasal congestion and oozing. **Soaking a cotton ball with oxymetazoline (Afrin Nasal Spray), stuffing it into the front of the nasal cavity and pinching the nostrils together for 10 minutes is often effective in halting troublesome bleeding during the first few days.**