

# Postoperative care - Adenoidectomy

Information for the child and their family



## **This brochure contains all the information you need to facilitate your child's return home after surgery.**

An adenoidectomy is an operation to remove the adenoids (or vegetations) at the back of the nose. When these are too large, they can interfere with nasal breathing, contribute to snoring and sleep apnea and cause fluid to build up behind the eardrums.

**Total recovery time: 7 days**

### **Pain relief**

- If there's any pain, it'll be most intense in the first 3 days after surgery. Don't hesitate to give acetaminophen regularly, as prescribed by your doctor, even if there's no pain for the first few days.
- Give **acetaminophen** (Tylenol®, Tempra®, Atasol®) in tablet, liquid or suppository form every **4 to 6 hours** if your child is experiencing pain or discomfort, preferably 45 minutes before meals and at bedtime.
- The recommended dose for children is 15 mg/kg of acetaminophen every 4 to 6 hours. For older children weighing over 45 kg, the maximum dose is 650 mg every 4 to 6 hours.
- Don't wake your child to administer acetaminophen—wait until they wake up.
- If acetaminophen doesn't provide complete relief, you can give your child ibuprofen. The recommended dose is 10 mg/kg of ibuprofen every 6 hours. For older children weighing over 40 kg, the maximum dose is 400 mg every 6 hours.

**Avoid** the following drugs and products during recovery\*: Acetylsalicylic acid (Aspirin®, Asaphen®, Aspergum®);

Natural and homeopathic products (consult your pharmacist or surgeon before use)

**These drugs and products can increase the risk of bleeding.**

- \* If your child has been prescribed these drugs by a doctor, ask your ENT surgeon about them before the operation.

## Nasal Hygiene

From the day after surgery, ensure good nasal hygiene by irrigating each nostril with saline solution at least twice a day for at least 2 weeks. Use syringes or the Sinus Rinse® bottle for children. Refer to the nasal hygiene brochure for the saline solution technique and recipe. Watch this CHU Sainte-Justine video if you need to: <https://bitly.ws/34sfr>



Scan the QR code to view the instructional videos and brochure (in French only).

## Nausea and Vomiting

If your child is nauseous or vomiting, administer dimenhydrinate (**Gravol®**) rectally every **6 to 8 hours**. You can buy it over the counter, but you have to ask your pharmacist for it.

## Food and Drink

It's normal for your child to eat less than usual in the first few days after surgery. Regularly offer water or other fluids to promote good hydration. If your child can't tolerate any fluids, refuses to drink for more than 24 hours or isn't urinating, consult or call the ENT Clinic's nurse line.

### *When You Get Home*

**If the pain is under control, you can resume your child's usual diet when you get back home.** If your child is in pain or can't tolerate the food they usually eat:

- Start with cold liquids: water, fruit juice, Pedialyte® and Jell-O® solutions.
- Then, introduce lollipops and frozen desserts (e.g., Popsicles®, ice cream, sorbet).
- If these are tolerated, try fruit purees, dairy desserts (e.g., pudding, yogurt) and nutritious drinks (milkshakes, smoothies, meal replacements).
- Next, try purees, vegetables and warm soup.
- Gradually move towards softer, warmer foods as tolerated (e.g., omelette, pasta, ground meat, sauce).
- Resume your child's usual diet once the pain is under control and the previous steps have been tolerated.

## Resuming normal activities

- ▶ You should **keep your child at home for 5 to 7 days**, as directed by the surgeon.
- ▶ Your child can take a bath or shower and brush their teeth with toothpaste when they get home.
- ▶ Quiet activities are best (e.g., television, reading, puzzles).
- ▶ If accompanied by an adult, your child can get some fresh air and, during the summer, cool off in the pool.

### Avoid

- › Daycare: risk of infection
  - › Active outdoor play: not conducive to rest and recovery and increases the risk of bleeding
  - › Travel: avoid travelling abroad during recovery
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- ▶ General fatigue is common during recovery. Limit visits and outings.
  - ▶ Avoid contact with anyone who has a fever, a cold or infectious symptoms.
  - ▶ After 7 days, or as directed by the doctor, your child can return to school or daycare and resume sports activities.

## Frequently asked questions

### *Fever*

Your child may run a fever for 24 to 48 hours. Encourage your child to drink plenty of fluids to rehydrate (regularly, in small quantities). Call the nurse line or consult your doctor if your child has a fever of **38.5 °C rectally (38 °C orally) or higher for more than 48 hours**. Acetaminophen or ibuprofen can be given as needed. Be careful not to exceed the maximum dose if your child is already taking medication for the pain.

## ***Nasal or Oral Bleeding***

Blood-tinged secretions from the nose or mouth are common for the first few days after surgery. However, if there's heavy bleeding from the nose or mouth or bright red blood in vomit, you should immediately go to the emergency room of the hospital where your child had surgery. **In the case of active bleeding, immediate go to the nearest hospital emergency room.**

## ***Vomiting of Brown Blood or Dark/Black Stools***

During the procedure, some blood may leak into the stomach. Since the blood is partially digested, vomit may appear brownish and stools darker, sometimes black, in the first few days after surgery. If this persists or occurs more than 2 to 3 days after surgery, call the ENT Clinic nurse line or consult.

## ***Constipation***

If this is a problem, make sure your child gets plenty of fluids and eats more fibre (e.g., fruits and vegetables, prune juice). If your child still hasn't had a bowel movement after 3 to 4 days, use a mild laxative like a glycerine suppository (sold in pharmacies), or ask your pharmacist for advice.

## ***Bad Breath***

This may last until healing is complete, i.e., 10 to 14 days after surgery. It isn't usually a sign of infection. It's important to maintain good oral hygiene from the moment you get home, including brushing teeth morning and night and keeping hydrated.

If your child's tongue has a white coating, gently brush it twice a day when brushing teeth.

If bad breath persists, older children can gargle with alcohol-free mouthwash mixed in equal parts with room-temperature water.

**Caution:** make sure your child doesn't swallow the mouthwash. If you think your child might swallow, use salt water only (1/4 teaspoon table salt in 1 cup lukewarm tap water).

## *Ear pain*

This can start in the throat and extend to the ears due to shared nerve connections. If there's no fever or ear discharge, **it's probably not an ear infection**. The pain should subside over time and disappear when healing is complete (within a week of surgery). If the pain gets worse or doesn't go away, consult your family doctor or call the ENT Clinic's nurse line.

## *Voice Changes*

Your child's voice may sound different for several weeks. In most cases, this **improves spontaneously within 2 months of surgery**. If voice changes persist for more than 3 or 4 months, ask your ENT doctor about them at a follow-up appointment.

## *Nasal Regurgitation of Fluids When Drinking*

This is often accompanied by a change in voice and is usually temporary. If nasal regurgitation lasts longer than 2 months, ask your ENT doctor about it at a follow-up appointment.

## **Next appointment**

If your child was followed at **CHU Sainte-Justine** before the procedure:

- Call the Appointment Centre at 514-345-2141
- If your child was followed at the **Bloom Clinic** (formerly pediatric ENT clinic):
- Contact the Bloom Clinic at [www.cmme.ca/en](http://www.cmme.ca/en)
- If your child was followed at **Polyclinique Centre-Ville**:
- Call the Polyclinique at 514-507-7722

## **Do you have any questions?**

For any medical problem, leave a message with the nurses at the CHU Sainte-Justine ENT Clinic at **514-345-4931, ext. 6041**.

In your message, **please indicate your child's file number** (at the top of their blue hospital card), **their full name** and **the best phone number to reach you**. Your call will be returned in order of priority within 24 to 48 hours.

For all other inquiries, please call the reception of the ENT Clinic at **514-345-4931, ext. 4857**. The nurses and medical staff will be happy to answer your questions.

Have a safe trip home!



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