

SEPTOPLASTY AND TURBINATE REDUCTION

Septoplasty is an operation to correct a deformity of the partition between the two sides of the nose. The usual purpose is to improve breathing, but it may also be required to improve visualization of the nasal interior for treatment of polyps, inflammation, tumors, or bleeding. When the nasal septum is deformed, there is no medicine that will cause it to be permanently straightened, and so surgery is the only solution to this problem. Undesirable results which may occur include perforations of the septum (causing crusting and bleeding), failure to completely improve breathing, postoperative, bleeding and crusting, and a reduction in the sense of smell.

A turbinectomy is the surgical removal of an abnormally enlarged inferior (lower) or middle turbinate from inside the nose. It is considered a safe and effective procedure to relieve complaints of nasal stuffiness, snoring, and difficult nasal breathing. Sometimes the inferior turbinate may be cauterized or frozen rather than removed in order to make it smaller. It can be performed under either local or general anesthesia. Complications associated with turbinectomy include crusting, dryness, scarring, and bleeding. Postoperative bleeding is not uncommon. Saline nasal sprays are usually suggested to relieve dryness and aid in healing.

HEMOCARE

Avoid excessive activity for two weeks.

Keep head elevated at 30 degrees for approximately 24 hours to reduce pain and bleeding.

Do not take aspirin containing drugs.

The drip pad at the end of your nose may be changed as necessary. It may need to be changed 6-12 times during the first day following the surgery.

Splints are pieces of plastic placed along either side of the septum during the surgery. They are usually removed in approximately a week.

After the splints are removed it is important to irrigate your nose with a saline solution. These can be purchased as over the counter medications at the drug store. You can make your own saline by adding $\frac{1}{4}$ teaspoon of salt and $\frac{1}{4}$ teaspoon of baking soda to 8 ounces of warm tap water (the ingredients don't need to be sterile). You can instill this in your nose with a small bulb syringe that can be purchased at the drug store. Your nose should be so irrigated 2-3 times a day for the first month following surgery.

If you notice significant bleeding from your nose, sit in a chair and bend forward slightly. It is preferable for the blood to come out of your nose rather than run down your throat.

Pinch the end of your nose closed for a full ten minutes. If the bleeding does not subside gently blow your nose to remove the clots and then spray Afrin or Neosynephrine nose spray 5-6 times into each side of your nose. Alternatively you could soak a cotton ball with the medication and insert it into your nose as well. Apply pressure again to the end of your nose for ten minutes. If you fail to control the bleeding, or if you feel uncomfortable with the rate of bleeding call the office at (410)420-0057.

The hospital nurse will contact you the day following your procedure. If you have questions or concerns prior to that, feel free to call us at (410)420-0057.