

## *Upper Cape Ear, Nose & Throat, PC*

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### **Tonsillectomy**

#### **Purpose**

Tonsillectomy is commonly performed to treat patients with frequent episodes of tonsillitis, Tonsillectomy should decrease the number of these episodes and the need for repeated courses of antibiotics. It is still possible to get sore throats after a tonsillectomy.

Tonsillectomy is also commonly performed to treat tonsils which have become so large that they block the upper breathing passages. Tonsillectomy will remove the large obstructing tonsils and enlarge the upper airway. There are often many causes of a blocked airway, and tonsillectomy alone may not address all upper airway obstruction.

#### **Procedure**

Tonsillectomies are performed in a hospital or surgicenter under general anesthesia. Patients are completely asleep during the procedure. The operation is done through the mouth and does not involve any skin incisions. After the operation patients go to the recovery room, and then to a room in the hospital or surgicenter for an observation period. If they are able to drink adequately and have no problems with nausea or bleeding, patients are allowed to go home 3 -6 hours after the operation. Children under 3 years of age are recommended to stay overnight, If patients are unable to drink adequately or are nauseated from the anesthesia, they are kept overnight.

#### **Recovery**

Tonsillectomy, no matter how the procedure is performed, is uncomfortable during healing. After the operation patients will have a bad sore throat for about 7 to 10 days. The throat pain gradually lessens after the first week. It is difficult to swallow at first, and patients need to modify their diet. Cool liquids, popsicles, water ice and sorbet seem to work best for the first few days. It is best to avoid citrus juices (orange, grapefruit, etc.) and spicy foods as they may burn. Milk and ice cream may produce a lot of phlegm, so one should rinse well with water afterwards. Whenever the patient feels up to resuming their normal diet it is all right to do so. Remember the *more you drink the faster you will recover!*

Ear pain is common after tonsillectomy. The same nerves which go to the back of the throat also provide the ear with sensation. The area where the tonsils were removed usually have a gray or tan appearance. This does not mean the site is infected. Bad breath is also very common due to the bacteria which grow in the tonsillectomy sites

Patients are typically sent home with a prescription for a liquid narcotic for pain. This should be used on an as needed basis and can be discontinued when the pain subsides.. A local anesthetic liquid can also be helpful in treating the pain. Milder pain can be treated with Tylenol. Steroids are sometimes used to decrease, swelling and lessen pain. These also should be taken until finished. There may be nausea due to the anesthetic agent or from swallowing blood. An anti-nausea suppository can be used if this occurs.

### **Risks and Complications**

Bleeding can occur after a tonsillectomy. Minor bleeding is common, especially when the scab comes off of the tonsil site round the seventh day. More significant bleeding can occur in the immediate post-op period or round the 7-10th day. This bleeding can be serious enough to require control in the operating room. It is very rare to require a blood transfusion, even when there is post-operative bleeding.

Whenever surgery is performed in the mouth it is possible for teeth to be knocked loose.

The tongue is retracted during the procedure. This sometimes causes numbness in the tongue. The numbness is almost always temporary. In rare instances the numbness can be permanent

### **Follow-up**

Generally follow-up visits are scheduled for two weeks. If families have questions or problems there is always someone available from our practice to address issues that arise.

**I have read, understand and accept the risks and possible complications of this operation. Alternative types of treatment have been discussed with me and I want to go ahead with the surgery.**

\_\_\_\_\_  
Patient's/Parent's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness