



**Post-operative Instructions
Septoplasty and/or Turbinate Reduction,
and/or Rhinoplasty**

1. **Pain** – is variable; do not perform any exercise as this will increase pain as well as bleeding. Do not plan any projects during the first week post-operatively. Take pain medication prescribed with at least some food in your stomach; remember, the first night will likely bring some nausea from the general anesthetic, therefore no large meals.
2. **Rest** – as above; no exercise or excessive bending or lifting as this will increase pain and bleeding.
3. **Swelling** – the morning after surgery will probably have the greatest swelling in the eyelids and face (for Rhinoplasty). This may be minimized with the application of ice or a moist, cool cloth over the eyelids **starting when you arrive home** from the surgery center or hospital. The ice should be changed every 1/2 – 1 hour, if possible. **Elevation of the head** will also decrease the swelling post-operatively.
4. **Bleeding** – is expected post-operatively for Septoplasty, Turbinate Reduction and Rhinoplasty surgery. Nasal packing is frequently used to control this, yet oozing of blood often persists through the packing during the first 24 – 48 hours. A “mustache dressing” is usually applied in the operating room and should be changed whenever full of blood or secretions. This will only be necessary for the first 1 – 2 days. **DO NOT take Aspirin, Aspirin containing products, Ibuprofen, Advil®, Motrin®, Vitamin E, Gingko, or blood-thinning medications for 2 weeks** after surgery.
5. **Nasal Packing** – is frequently necessary to control bleeding. This usually remains in place from 2 -5 days, depending on the procedure performed. Antibiotics are often prescribed to prevent sinus infection from the packing. Dry mouth (from mouth breathing) may be minimized by using a humidifier (use sparingly in Rhinoplasty patients with external splints – see below).
6. **Nasal Splinting** – for Rhinoplasty is **very important**, as a poorly fitting splint may lead to a hematoma (a collection of blood) under the skin, which must be evacuated. A poorly fitting splint may lead to a less optimal cosmetic result. If your splint becomes displaced, **call Dr. Jungkeit at the number below** for further instructions. Keep the splint as dry as possible during bathing and showering.
7. **Irrigations** – nasal irrigation is also very **crucial** to good post-operative results **especially in Turbinate Reduction patients**, however, these will not begin until the nasal packing is removed. Expect to be misting the nose every 15-30 minutes while awake until the spacers (septal stents) are removed and then every 2-3 hours while awake for 1 month post-operatively. Instructions for saline (salt-water) nasal misting will be given on a separate handout at the time of packing removal in the clinic.

Revised 3/10