

DIET:

1. A light diet, such as gelatin, liquids, popsicles and broth, is best for the first 24 hours following surgery. Avoid spicy, hot or gaseous foods.
2. If patient experiences nausea or vomiting, avoid giving solid foods. Try tea, Gatorade, 7-Up, etc. until nausea passes.
3. Avoid foods that are hard to chew. Do not chew gum.
4. Avoid straws.

MEDICATIONS:

Continue routine medications.

Patient given Rx: _____

Usually there is little actual pain following rhinoplasty/nasal fracture surgery, but you will feel deep bruising. You may alternate ibuprofen with your prescribed pain medication, unless directed differently. **Do NOT TAKE ASPIRIN.** If you are **NO LONGER** taking prescribed pain medication, you may alternate Tylenol with Ibuprofen for pain control.

If taking prescribed pain medication, you should not drink alcoholic beverages or drive a car.

GENERAL ANESTHETIC:

After a general anesthetic, the patient may experience some weakness, dizziness, and sleepiness. A responsible adult must stay with the patient for 24 hours because of the effects of the anesthesia. Adults should not drive a car, operate dangerous machinery or make important or legal decisions for up to 24 hours. You may feel weak for 2-3 days. You may have a sore throat for a while.

ACTIVITY – TRY NOT TO:

1. Do not get the bandages or cast wet.
2. Try not to sniff and sneeze until the bandage is removed. If you must sneeze, do so with your mouth open and “sneeze” through your mouth.
3. Do not blow your nose at all for 7 days after surgery. Then you may blow your nose gently through both sides at once. Don’t pinch off one side.
4. Do not rub the nostrils with Kleenex too much. Use the drip pads for drainage and change as necessary.
5. Do not bend, lift heavy objects, or join in on any contact athletic activity for 1 month.
6. Do not bump or hit your nose if possible.

ACTIVITIES – To Do:

1. Keep the head elevated as much as possible to help decrease swelling. Sleep with your head elevated with several pillows or in a recliner until all the dressings are removed.
2. You will be able to return to school or office work the day after the cast is removed. If your job takes physical labor the doctor will tell you when you can return to work.

Instructions explained by: _____ Date: _____

I understand the above: _____ Relationship: _____

PATIENT INSTRUCTIONS
NASAL FRACTURE/SEPTOPLASTY
DRS. JETMORE, BAWA, & HIRONS

3. You may tub bathe as soon as you feel strong enough to do so. **Do Not** get bandages or cast wet.
4. If lips become dry, coat them with mineral oil, Vaseline or lipstick. Gargle with mouthwash or salt water 3-4 time per day. Use of throat lozenges or hard candy to promote salivary production will be beneficial to relief the throat dryness and soreness.

SPECIAL INSTRUCTIONS:

1. You may have packing and/or splints in your nose. Due to this, you may not be able to breathe through your nose at first and you may have some discomfort. Nasal congestion may last for several days after surgery.
2. **Do Not** remove the packing from your nose. The surgeon will do this during your first post-op visit. After packing is removed, use saltwater nasal spray, 2 sprays both sides, every 2-3 hours while awake. If **dissolvable packing** is used, begin using saltwater spray 48 hours after your surgery.
3. During the first 12-14 hours after surgery, the drainage from your nose will be fairly heavy and usually dark red in color. This flow will subside and the color will lighten within 24 hours after surgery. It is common to have to change the nasal drip pad frequently. You may remove drip pad during meals if it is in the way.
4. Discoloration from your nose or in the back of your throat is not unusual and will go away over a period of 3-4 weeks.
5. A humidifier or vaporizer in your home, especially in your room at night while sleeping, will help.

FOLLOW-UP:

Office appointment _____

Keep appointment as made during patient’s pre-op visit.

Other: _____

MISCELLANEOUS:

Contact physician if patient experiences:

1. Constant heavy bleeding
2. Worse pain not relieved by medication.
3. Change in the ability to see.
4. Persistent temperature greater than 101°F which lasts for eight or more hours.

Drs. Jetmore, Bawa, & Hirons

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For serious problems, report to your nearest Emergency Department.

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