



Patient Information – Following Nasal Surgery

This information leaflet contains information and instructions that you should follow after having nasal surgery (septoplasty / sinus surgery (also known as 'FESS') / turbinate reduction).

After General Anaesthetic

After any surgery, especially after a general anaesthetic, you may feel tired and disorientated. You should not drive or operate machinery for 48 hours following surgery. Insurance companies may not cover you in the event of an accident occurring within a few days of surgery.

Stitches and packs

Stitches will dissolve on their own and do not need to be removed.

We usually put a dressing in each side of your nose to keep things in place and prevent bleeding. The dressings are called 'packs', and they will block your nose so that you have to breathe through your mouth. Most of the time packs do not need to be removed and will come out in pieces over the next few days as you perform nasal rinsing.

Saline nasal douching (salt-water nasal rinsing)

To help your nose to heal after the operation we usually recommend you perform saline (salt water) nasal douching twice a day for the first month – you can start this the day after your operation. This will help clear out any blood clots and remove dissolvable packing from your nose. It will also help you to breathe through your nose again and relieve discomfort.

We recommend you purchase an over-the-counter salt water nasal rinsing device such as 'NeilMed Sinusrinse' or 'Sterimar spray', unfortunately we are not able to issue these.

What might I experience after the operation?

You will get some mild bleeding or oozing from your nose for the first few days after surgery. This is normal.



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For the first few days you may wish to wear a 'nasal bolster' dressing (ask your nurse for some spare ones) to catch the discharge from your nose. Alternatively use tissues to gently wipe your nose – do not blow your nose for two weeks. Your nose will feel blocked like a heavy cold for the first two weeks after the operation, performing the nasal rinsing will help relieve this. We may give you some nasal drops or sprays to use in addition. It could take a couple of months for your nose to settle down fully and for your breathing to feel clear.

For any discomfort that you may have, paracetamol and ibuprofen are usually sufficient (follow the instructions on the packet). If you need stronger pain relief you should contact your GP, or the ENT department.

When will I be followed up?

The hospital will send you an outpatient appointment in the ENT clinic usually between six to eight weeks after the operation unless your surgeon advises otherwise. This will be sent through the post. If you do not hear from the hospital within a month of your operation, please get in touch.

How long will I need off work/school?

You should be able to return to work, school or normal activities after two weeks depending on the extend of surgery and your type of work.

Other specific advice

Do not blow your nose for about two weeks or it might start bleeding.

If you are going to sneeze, sneeze with your mouth open to protect your nose.

Avoid dusty and crowded places and people with colds for two weeks.

What problems should I look out for?

Complications are uncommon following nasal surgery but can include:

Pain regular pain killers such as paracetamol and ibuprofen will help to ease this.

Bleeding sometimes your nose can bleed more heavily after this operation, and we may have to put non-dissolving packs into your nose to stop it (these have to be removed later). This can happen up to 10 days after surgery. Rarely you may need to return to the operating theatre to stop the bleeding.



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To stop bleeding: tilt your head forwards, pinch the lower part of your nose (soft bit above the nostrils) firmly without letting go for 15 minutes. You can also apply an ice pack (wrapped in a Towel) to the bridge of your nose / forehead. If the bleeding doesn't stop, go to the Emergency Department.

Infection of the nose may cause redness / pain around the nose or cause yellow pus to come out the nostrils. It usually settles with antibiotics, please seek medical attention.

Septal perforation (a hole in the septum) may happen rarely. This does not usually cause any problems. Sometimes it may cause whistling, crusting or bleeding and may require further surgery to close the hole.

Numbness of teeth, gums. Very rarely you can have some numbness of your teeth and gums, which usually settles with time.

Persistent severe headache, bruising or swelling around the eye, or clear watery drainage from the nose may happen very rarely. These symptoms require immediate medical attention.

How do I get in touch?

If you need any further advice, we advise that you contact the hospital using the contact numbers below. Your first point of contact should be the ENT department during working hours Monday to Friday 8am to 4.30 pm. Outside of these hours please contact the ward from which you were discharged, your emergency GP service or the NHS helpline.

| | | |
|-------------------|---------------------|------------------------|
| ENT clinic Nurse: | 01793 604414 | (As above) |
| Children's Unit: | 01793 604095 | (24h / 7 days) |
| Day Surgery: | 01793 604152 / 4148 | (0800 - 2000 weekdays) |
| Daisy Ward: | 01793 603040 / 3041 | (24h / 7 days) |
| Meldon Ward: | 01793 646276 | (24h / 7 days) |
| Shalbourne Suite: | 01793 646060 | (24h / 7 days) |
| NHS Helpline: | 111 | (24h / 7 days) |



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Please remember you were given the following pain relief while in hospital

Paracetamol at:

Codeine at:

Ibuprofen at:

Smoking will not be permitted on any NHS site in England. Smoking will not be permitted within any of our buildings or anywhere outside on our sites. Smoking facilities will not be provided. Please be considerate of others when vaping in hospital grounds.

This information sheet is available to order in other languages and formats. If you would like a copy, please contact us on 01793 604031 or email gwh.pals@nhs.net

Document Control

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