

GOING HOME AFTER THE PROCEDURE

NASAL DRESSINGS. There is rarely a dressing placed in the nose. Occasionally, a small mustache-like dressing will be placed on the upper lip to absorb any drainage. If this is needed, you will be given any supplies and dressings for your home care.

PAIN. Because, there may be some nasal and facial pressure or nasal stuffiness after the surgery, there will be pain medication for you in the recovery area and a prescription for you to take home. You may take acetaminophen (Tylenol®) as directed on the label.

THE FIRST SEVERAL WEEKS AFTER SURGERY

NASAL CARE. The nose will be dry and stuffy for several weeks. It will feel as if you have a bad cold. Using an over-the-counter saltwater (saline) nasal spray frequently during the day will help. You may begin to gently blow the nose after seven days.

It is common for the mucus to be blood-tinged and have a few scabs. This may continue for up to four weeks. Vigorous nose blowing should be avoided since it may cause bleeding.

You will experience a stuffy, congested nose for several weeks.

BLEEDING. If excessive bleeding occurs, you may spray oxymetazalone (Afrin®) nasal spray into the nose or dampen a cotton-ball with the spray and insert it into the nostril. If bleeding continues, call the doctor.

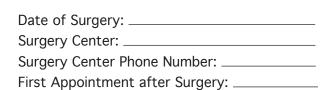
ACTIVITY. You may resume all activity within 72 hours as long as there is no bleeding from the nose.



THE FIRST MONTH AFTER SURGERY

Your breathing will not be its best and the nasal drainage will not lessen for about four weeks after surgery. It takes time for the nose to heal after surgery. Some days may be more uncomfortable than others. Overall, each day will be a little better than the day before.

Remember, your recovery is a process not an event. $\hat{\beta}$



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TURBINATE REDUCTION SURGERY



You deserve a breath of fresh air ®

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REDUCTION of the TURBINATE SURGERY is an operation to improve breathing through the nose.

REDUCTION of the TURBINATE SURGERY is a nearly painless, low-level radiofrequency procedure to reduce (shrink) the turbinates (the shelf-like structures which hang from the sides of the nasal cavity) and most often eliminates nasal obstruction.

The most common use of TURBINATE REDUCTION surgery in nasal problems is for the treatment of vasomotor rhinitis, a nasal condition in which turbinates become swollen and produce excessive mucus—exhibiting allergy-like symptoms without the presence of an allergy.

The low level radiofrequency produces heat within the turbinate. The heat creates a scar within the turbinate which is not painful but does tighten the turbinate.

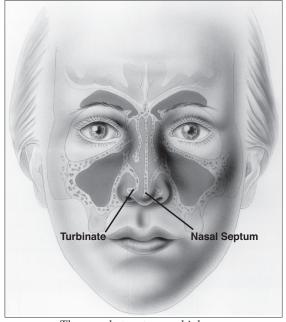
Over approximately a six week period after the TURBINATE REDUCTION procedure, this tightening reduces the size of the turbinate and it's ability to expand. The result of this shrinkage is a reduction in the nasal obstruction.

The TURBINATE REDUCTION procedure is effective in over 85% of patients.

PREPARING FOR THE PROCEDURE

ASPIRIN, IBUPROFEN PRODUCTS (Advil®, Nuprin®, Motrin®, other NSAIDS). You must not take any of these products for one week before and one week following your surgery. If you have any questions about your medications, contact your doctor.





The nasal structures which may make breathing difficult.

SPECIAL MEDICATIONS. Bring medication taken regularly with you. If you use medications for high blood pressure, heart problems, asthma or diabetes, check with your surgeon about taking them the morning of your procedure.

MEDICAL PROBLEMS. You should notify your physician if you have had heart surgery, have mitral valve prolapse or have had a joint replacement. An antibiotic may be given to you to take before your procedure.

The actual TURBINATE REDUCTION procedure for nasal-sinus surgery may be relatively short—about 15 minutes—and may be performed as an as an office procedure under local anesthesia or as an outpatient with sedation and attended local anesthesia.



TURBINATE REDUCTION AS OFFICE PROCEDURE

DRIVING. If your procedure is being done in the office, you will not receive sedation and may drive yourself to and from the office.

EATING & DRINKING BEFORE SURGERY. You may eat or drink as you wish.

ANESTHESIA. Your nose will be sprayed with a topical anesthesia. A small, relatively painless injection will be made in the nose. You will have a chance to discuss this with your surgeon or member of the office clinical staff prior to the procedure.

TURBINATE REDUCTION AS OUT-PATIENT SURGERY

ARRANGE FOR TRANSPORTATION. If your procedure is being done in the out-patient surgery center and you are receiving sedation, you should not drive for 24 hours. Therefore, you must have someone drive you home.

SURGERY SCHEDULE. If your procedure is being done in an out-patient surgery center, you will be told by the surgery center when to arrive for your procedure.

EATING & DRINKING BEFORE SURGERY. Most anesthetics require a time period with no food or drink. You will be advised about your eating and drinking schedule.

LEAVE VALUABLES AT HOME.

WHAT TO BRING TO THE HOSPITAL or OUT-PATIENT-SURGERY CENTER. Wear loose, comfortable clothing.

ANESTHESIA. Most TURBINATE REDUCTION procedures are performed under local sedative anesthesia. You may be given medication through a vein to relax you and make you sleepy and comfortable. You will have a chance to discuss your anesthesia with a member of the anesthesia department before your procedure.