

Tonsillectomy/Adenoidectomy

Paediatric, After Care

After a tonsillectomy/adenoidectomy procedure it is common for children to have:

- Pain:
 - When swallowing, drinking, and eating.
 - In the neck, jaw, or throat.
 - In the ear. A feeling that the ears are plugged is also common.

Pain after a tonsillectomy often gets worse at three to five days after surgery – this is normal.

- Snoring or breathing through the mouth when sleeping.
- Swelling in the middle of the roof of the mouth (uvula).
- Nausea and vomiting, most commonly in the first 24 hours after the procedure. There may be a little blood in the vomit.
- A cough or congestion and a need to clear the throat of mucus and thick spit (phlegm). There may be a little blood in the phlegm.
- Fever.
- Bad breath.
- A voice that sounds muffled.
- About five to 10 days after surgery, a thick, white scab will form where the tonsils used to be. This is not a sign of infection.

Your child may start feeling better after a week. Encouraging your child to swallow, drink liquids, and eat soft foods can help with recovery.

General Instructions

Have your child avoid gargling and using mouthwashes until the healthcare provider says it is okay to avoid bleeding.

While your child is recovering, keep them away from people who have infections.

Have your child avoid taking trips by airplane until at least two weeks after the procedure.

Keep all follow-up visits as advised by your child's healthcare provider. **This is important.**

Medicines

Give over-the-counter and prescription medicines only as told by your child's healthcare provider. Pain medicine may help with swallowing.

It is especially important to keep on top of pain control in the first five days. Your child should have ibuprofen and Tylenol around the clock. Ideally, you can alternate each medication every four hours.

- For example, at noon take Tylenol at 15 mg/kg, at 4:00 pm, take ibuprofen 10 mg/kg, at 8:00 pm repeat the Tylenol.
- If you were prescribed additional medication, this can be taken if the pain is not controlled with the above regimen.
- Do not give your child aspirin because of the association with Reye's syndrome.

Ask your child's healthcare provider if the medicine prescribed to your child:

- Will make them feel drowsy
- Can cause constipation. Your child may need to take these actions to prevent or treat constipation:
 - Take over-the-counter or prescription medicines.

- Eat foods that are high in fiber, such as smoothies made from fresh fruits and vegetables.
- Limit foods high in fat and processed sugars, such as fried or sweet foods.

Managing your Child's Pain

Keeping pain under control can help your child rest and make swallowing easier. To make your child more comfortable when they are lying down, try keeping your child's head raised (elevated). To help with throat dryness and swallowing, use a humidifier near your child.

Eating and Drinking

Have your child drink enough fluid to keep their urine pale yellow. This will reduce pain and speed healing. Water and apple juice are helpful.



Avoid giving your child hot drinks or sour drinks, such as orange or grapefruit juice. These drinks can irritate the throat.

For the first several days after surgery, give your child soft, cold foods like gelatin, sherbet, ice cream, frozen fruit pops, and fruit smoothies. These foods are usually the easiest to eat. Several days after surgery, you may give your child soft, solid foods such as well-cooked pasta. Add new foods slowly over time as tolerated. To make swallowing less painful during eating:

- Start by giving your child small portions of soft, cool foods, such as eggs, oatmeal, sandwiches (not toasted), mashed potatoes, and pasta;
- Offer several small meals and snacks throughout the day;
- Manage pain, swelling, and discomfort; and
- Do not have your child eat more than they can tolerate at one time.

Activity

Have your child rest. If your child was given medicine to help them relax (sedative) during the procedure, they can be affected for several hours. Do not let an older child operate machinery until the healthcare provider says it is safe. Before returning to school, your child should be able to:

- Eat and drink as usual;
- Sleep through the night; and
- Go without pain medicine.

Have your child return to their normal activities as advised by the healthcare provider. Ask your child's healthcare provider what activities are safe for your child.

Contact a Healthcare Provider if Your Child Has:

- Pain that gets worse and is not controlled with medicines;
- A fever that lasts longer than two days;
- Light-headedness, or if they faint;
- Signs of dehydration, including urinating fewer than two to three times a day or crying without tears; or
- Trouble swallowing small amounts of liquid or saliva.

Get Help Right Away if Your Child Has:

- Trouble breathing;
- Bright red blood coming from their throat, or if your child vomits bright red blood;
- Your child who is three months to three years old has a temperature of 102.2°F (39°C) or higher; or
- Your child who is younger than three months has a temperature of 100.4°F (38°C) or higher.

A little blood in your child's phlegm is normal after surgery. More bleeding is serious. Get help right away if your child vomits bright red blood or has bright red blood coming from their throat.