POSTOPERATIVE INSTRUCTIONS
Tonsillectomy and Adenoidectomy – Pediatric

Tonsillectomy is the removal of the tonsils. Adenoidectomy is the removal of the adenoids.
Both surgeries may be done together or individually.

General Information: Your child may lack energy for several days, and may also be restless at night. This will improve over three to four days after an adenoidectomy, and 10 to 14 days after a tonsillectomy. Recovery from an adenoidectomy alone is easier than recovery from a tonsillectomy. It is quite common for your child to feel progressively worse during the first five to six days after surgery. Your child may also become constipated during this time for three reasons: he will not be eating his regular diet, he will be taking pain medications, and he may be less active.

Diet: It is important for your child to drink plenty of fluids the first three days. Offer your child a drink every hour he/she is awake. Most children don't feel like eating after several days. This is alright as long as your child drinks lots of fluids. Signs that your child needs to drink more are when the urine is darker in color (urine should be pale yellow). A high fever that persists may also be a sign that your child is not taking in enough fluids. Please notify your surgeon if your child refuses liquids during the post-operative period. As your child's appetite improves, solid foods and chewing should be strongly encouraged. Offer liquids such as popsicles, slushes, and soft drinks. You can advance your child’s diet to soft foods (mashed potatoes, pasta, etc.) as tolerated.

Activity: The child should rest at home for the first 48 hours. Activity may increase as strength returns. Generally children return to school approximately 7 days following a tonsillectomy; and about three days after an adenoidectomy. All children should avoid swimming and vigorous activity (PE or sports) for 14 days after surgery.

Pain: Throat and ear pain can be severe after a tonsillectomy. Give regular doses of pain medicine as prescribed or over the counter medications. Chewing gum may be helpful in lessening muscle spasm and should be encouraged.

Bad Breath/Snoring: Bad breath is very common due to the healing in the back of the throat. Your child may gargle with a mild salt water solution to improve the bad breath (1/2 teaspoon table salt to eight oz. of warm tap water) and offer chewing gum. Most children breathe through the mouth and snore during the recovery period due to swelling. This may last between 2-3 weeks. It may be helped by propping up with pillows and using an ice collar. Turning on a humidifier at bedtime may lessen throat dryness caused by mouth breathing. Avoid over-the-counter mouthwashes (Cepacol, Scope, Listerine, etc.) - they tend to dry the throat and cause discomfort.

Bleeding: There should be NO bleeding from the nose or mouth. We ask that you set your alarm and check the child at least once during the first night. If you see any bleeding at all, sit the child upright and phone your doctor immediately. Swishing the mouth out with cold ice water may help stop the bleeding (rinse and spit over and over). Between 5 and 10 days after surgery, the white or grayish membrane (soft scab) breaks off in the back of the throat. A small amount of bloody mucus may be spit up. If this continues after a few minutes, please call the doctor. If you are unable to reach the doctor quickly, please bring him/her to the emergency room.

Fever: It is normal for a child to have a slight fever (99.0° to 101.0°) for the first few days following surgery. Good fluid intake and Tylenol will help keep the fever down. If the fever is over 101 degrees contact your doctor.

Nausea/Vomiting: It is not unusual for the child to feel sick following a tonsillectomy. If vomiting persists into late evening you may want to contact the doctor for a medication to help the child feel better. If your child is still vomiting the day after surgery you need to notify the doctor.

For questions or emergency care, please contact us at 985-327-5905.