



# Rhinoplasty or Septorhinoplasty

## What is a rhinoplasty?

A rhinoplasty (pronounced rye-no-plas-tee) is an operation of the bones, cartilage and soft tissues of the nose. A septorhinoplasty (sep-to-rye-no-plas-tee) includes surgery on the septum, or the wall between the two sides of the nose. This may be done if your child cannot breathe well through the nose. A child with cleft lip or cleft lip and palate will often have surgery on their nose one or more times during childhood and early adulthood to improve the shape, appearance and function of the nose.

## What happens during the surgery?

Surgery is done with general anesthesia. This means that your child will be completely “asleep” during surgery. Bone or cartilage in the nose is removed, remodeled or added. If extra bone or cartilage needs to be added (called a graft), the surgeon will take small pieces from your child’s septum, ear or rib. When the surgery is finished, the surgeon may leave cotton packing or soft plastic tubes in the nostrils to help maintain the shape of the nose while it heals. A “moustache” dressing will be placed under the nose. There may also be a firm splint over the nose to protect it, held in place with tape.

## How do I care for my child after surgery?

Swelling, bruising and numbness of the face and nose are normal. Most of this will improve within two to three weeks, but some swelling can continue for a long time, even up to one year after surgery.

- Keep the head of your child’s bed elevated, or use an extra 1 to 2 pillows, for the first few days to help the swelling go down.
- If your child can tolerate it, use a clean, dry bag of ice on the face for 24 to 48 hours after surgery. This will also help reduce swelling.
- Gently clean your child’s face with water and mild soap. Do not get the nasal splint wet.
- Put antibiotic ointment on a Q-tip, and lubricate the nostrils and stitches to keep the area clean and prevent the build-up of crusty drainage.
- When the nasal packing is taken out, the inside of the nose may still be swollen, and breathing through the nose may be difficult. You can put saline or saltwater drops in the nose to keep the normal drainage in the nose from getting thick and crusty.
- If a splint was placed over the nose, it will be removed in one to two weeks. As the swelling lessens, the splint may loosen. Please try to keep the splint in place until it is removed in clinic.

- Some bleeding from the nose is normal, even after your child goes home, and will get less every day. The dressing under the nose will collect any drainage from the nose, and can be changed as needed.
- If the bleeding suddenly increases, have your child rest and apply ice to the bridge of the nose.
- Your child should dab their nose instead of blowing it to get rid of secretions. If your child feels the need to sneeze, they should try to keep their mouth open. If your child sneezes through the nose, don't be alarmed if you see some blood or even clots come out of the nose. Wipe or dab the nose gently with clean tissue.
- Help your child to brush their teeth gently twice a day. Your child's teeth may feel sore for several weeks. Their gums and palate may feel numb for several months.

### **How can I help my child with pain?**

- Pain is common after surgery, but will get less each day. Right after surgery, the nurses will give your child pain medicine through the IV. Once your child is able to drink, pain medicines can be given by mouth.
- Give your child oral pain medicine for the first few days at home. At first, it is best to give the medicine on a regular schedule. Once the pain is reduced, you may give it only as needed. Narcotic medicines often cause constipation. Make sure your child is getting plenty of fluids, fruits and vegetables to help with this. We do not want your child to have to strain to have a bowel movement.
- Your child may find sleeping or resting on several pillows is more comfortable and helps the swelling go down. Listening to music, watching videos, reading and playing quiet games are all distractions that may help pass the time until your child feels better.

### **What can my child eat?**

Nausea and vomiting (throwing up) may occur after this type of surgery. Medicines can be given through the IV to help prevent this. The nurses will offer your child clear liquids to drink when your child is ready.

When your child is hungry, a diet of soft foods that do not need much chewing is best. Foods such as hot cereals, soup, pasta, mashed potatoes, soft cooked vegetables and fruits, ground meats, soft fish, tofu, yogurt, ice cream, etc. are good choices.

If your child has trouble eating well, you can make nutritious shakes or smoothies using Carnation Instant Breakfast or a similar product.

### **How much activity can my child do?**

- Most children will need rest and quiet activities for the first week.
- After 1 week, if all bleeding from the nose has stopped and your child feels ready, they can return to school.

### To Learn More

- Craniofacial Center  
206-987-2208
- Ask your child's nurse  
or doctor
- [www.seattlechildrens.org](http://www.seattlechildrens.org)

### Free Interpreter Services

- In the hospital, ask  
your child's nurse.
- From outside the  
hospital, call the  
toll-free Family  
Interpreting Line  
1-866-583-1527.  
Tell the interpreter  
the name or extension  
you need.
- For Deaf and hard of  
hearing callers  
206-987-2280 (TTY).

- No recess, PE or sports for at least 6 weeks. It is a good idea to work with your child's school nurse and/or teachers to plan alternate activities for your child. Often, it is helpful if friends can take turns participating in these quiet activities with your child.

### More care tips:

- Do not use any cold or sinus medicines or nasal sprays (except for plain saline or saltwater) without checking with your doctor.
- Your child can wear eyeglasses once the nose is no longer swollen. Usually, your child can wear contact lenses within 48 to 72 hours.
- Your child can begin to wear make-up in one week.
- Avoid direct sunlight. Your child should wear sun block with an SPF greater than 15 and a hat to protect the face.

### When should I be concerned and call?

Call the Craniofacial nurse 206-987-2208, option 4, or call the Plastic Surgery resident on call 206-987-2000 with any questions or the following concerns:

- The bleeding increases and does not stop with rest and ice
- Your child has a fever greater than 101.5°F
- Your child is not able to keep fluids down
- The pain is not relieved with medicines