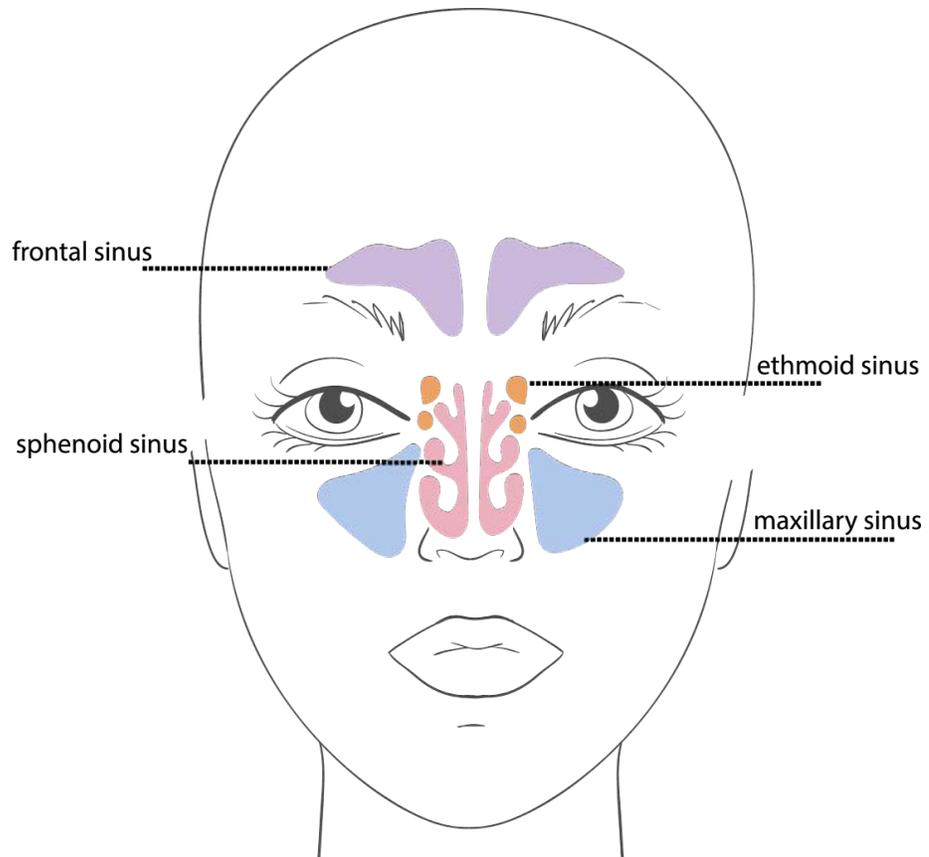




Sinusitis and Sinus Surgery

Provides parents general information on sinusitis and instructions for care at home after surgery.



What is sinusitis?

The sinuses are air-filled spaces, in the skull. When sinuses become infected, this is called sinusitis. This can be due to a cold or upper respiratory infection, allergies, air pollution, cigarette smoke or other irritants. Children with sinusitis usually have yellow or green nasal drainage and fever. They may also have cough and head ache.

Patients with sinusitis can be treated with antibiotics, decongestants, nasal sprays, and allergy therapy and by avoiding irritants. If sinus problems continue to be a problem for more than three months even with treatment, we call this chronic sinusitis.

For children with chronic sinusitis, we may recommend a special X-ray called a CT scan to get a picture of your child's sinuses. This can show what is causing the problem and what type of treatment that should be considered.

What is sinus surgery?

If sinusitis won't go away with medicine, sometimes we drain the sinuses with surgery. Sinus surgery is done with the patient under general anesthesia. Usually the patient can go home the same day as surgery, but patients with other medical issues may need to stay in the hospital after surgery. This can help relieve sinus problems, but may not correct all the factors that cause chronic sinusitis.

To Learn More

- Otolaryngology
206-987-2105
- Ask your child's healthcare provider
- 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.

Instructions for after sinus surgery

Fever

- After surgery, it is normal for children to have a temperature between 100 °F and 101.5°F for several days.
- If your child's temperature remains at 101.5°F or more for 3 to 4 hours after you've given them acetaminophen (Tylenol), call your child's doctor.

Pain

- Discomfort is common right after surgery, but should get better after the first day.
- If your child's doctor recommends it, you can use acetaminophen (Tylenol) according to the instructions to relieve discomfort. If that does not seem to help, use the pain medicine as prescribed by your child's doctor.
- Do not combine Tylenol with the prescription pain medicine unless your pharmacist or doctor approves it.
- You know your child best. No matter the level of your child's pain, believe they are hurting and respond right away.

Drainage from the nose

- Bloody drainage from the nose is common and may last for 2 to 3 days.
- Drainage may change from bright red on the first day to dark brown by day 3.
- Use a nasal drip pad as needed for the next 48 hours. We will give you extra nasal drip pads.
- Rinse your child's nose by putting saline drops in both nostrils 3 to 4 times a day for one week.

Eating

- Your child might feel sick to their stomach or throw up after their surgery. This is common. Have your child eat clear liquids for the first few hours after surgery to help.
- If your child doesn't throw up after drinking liquids, they can go back to eating their regular diet.
- Call your doctor if child continues to throw up for more than 24 hours after surgery.

Medicine

- Your doctor will prescribe antibiotics to prevent infection.
- Your doctor will also prescribe pain medicine.

Follow-up appointment

Your child will need a follow up appointment in the Otolaryngology Clinic in 1 to 2 weeks. If you don't have an appointment scheduled, please call us.

Seattle Children's offers interpreter services for Deaf, hard of hearing or non-English speaking patients, family members and legal representatives free of charge. Seattle Children's will make this information available in alternate formats upon request. Call the Family Resource Center at 206-987-2201.

This handout has been reviewed by clinical staff at Seattle Children's. However, your child's needs are unique. Before you act or rely upon this information, please talk with your child's healthcare provider.

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