

EAR, NOSE & THROAT CONSULTANTS OF NEVADA

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PHONE: (702) 792-6700 FAX: (702) 792-7198 <u>www.entc.com</u>

Post-Operative Instructions: Uvulapalatopharyngoplasty (UPPP)

- 1. Usually this operation is done as an outpatient surgery. The patient is kept for a period of 3 to 5 hours; or in some instances up to 23 hours at which point the patient may be safely discharged to go home. However, occasionally a patient may require admission to the hospital for an additional stay after surgery. This is usually done due to inability to take or keep down fluids. If this should occur, your doctor will discuss this with you.
- 2. On returning home, the patient should be restrained from activity for three to five days. Do not allow anyone with an infectious disease to be closely associated with the patient. Providing all is well, the patient may be up and around the house as soon as he/she feels well with reasonable restrictions on activity. The patient may go out of doors on the third or fourth day if weather permits. The patient will be unable to return to work for 5 to 7 days after the operation. A post-op appointment should be made 2-3 weeks after surgery.

4 to 8 oz. OF LIQUID TO BE TAKEN EVERY WAKING HOUR POSTOPERATIVELY!

REMEMBER: No Advil, Motrin, Ibuprofen or any Aspirin products for *two weeks* postoperatively.

- 3. The diet should be liquids or very soft foods every half-hour, especially for the first 3 to 5 days. These may include water, juice, milk, ginger ale, soda (for carbonated beverages shake until flat before drinking), ice cream, popsicles or soup, see soft food list attached for more suggestions. Lack of proper fluid intake may cause high fever from dehydration. The second day continue with fluids but add more soft foods if you can. Harsh foods may cause pain or bleeding from the throat. As soreness decreases, a normal diet may be resumed. As long as fluid intake is adequate, the patient will resume eating solid food voluntarily as the discomfort subsides. Acidic foods and drinks such as lemonade, orange juice, tomato juice/sauce, etc., should not be given for the first 5 to 7 days.
- 4. Pain in the ears is a frequent complaint and is usually "referred" from the soft palate due to the process of healing. The pain may be relieved somewhat by placing a hot water bottle to the ears or an ice collar around the neck. Some increase in temperature, up to 102 degrees is not abnormal for the first few days after surgery. The fever may be reduced with Tylenol if needed. Aspirin, Aspergum, Advil, Motrin, Aleve or Nuprin are **NOT** to be used.
- 5. Frequently, there will be a nasal quality to the patient's voice following the surgery. This is a natural accompaniment of removal of bulky soft palate, uvula and/or tonsil tissue from the resonating cavities of the mouth and the back of the nose. This may persist for a few weeks until the muscles readjust. When drinking or eating after surgery, foods and liquids may have a tendency to come up through the nose. This will dissipate within a few weeks after the tissue and muscles have had a chance to heal and adjust to all the room you now have to breathe and eat with.

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- 6. There may be blood in your saliva for the first 48 hours. Any bleeding which lasts for longer than a few minutes should be reported to your doctor. Bleeding can occur up to 10 to 14 days after surgery off and on. Please make sure you are within a reasonable distance to medical care during this period of time. In case of any heavy bleeding, please call the office at 792-6700 or go to the emergency room at the nearest hospital.
- 7. Immediately after surgery the patient will feel very uncomfortable and in some pain for 10 14 days, this is normal.
- 8. Scabs will form over the site where the tonsils used to be and along the soft palate, they will be white/gray in color. These scabs will cause bad breath until they come off, this usually happens in the patient's sleep. Some pain can reoccur after the scabs have come off, this is normal.
- 9. It is **VERY IMPORTANT** that the patient drink 4-8 oz. of fluid every waking hour following the surgery. If this is not done, the patient will get dehydrated and develop a fever.
- 10. If a fever of 102 degrees or higher occurs:
- a) **DO NOT PANIC**. It is normal to have a fever post-operatively; however, this is a sign to keep a closer watch on the patient's intake of fluids
- b) Usually this means that the patient is not drinking enough fluids. Remember that 4-8 oz every waking hour is the minimum requirement.
- c) Start keeping a diary of the patient's temperature and the amount of fluid taken in for the doctor to evaluate in case an IV will eventually be needed.
- d) Note the number of times the patient urinates daily
- e) Encourage the patient to cough and breathe deeply twice hourly to prevent any post-anesthesia complications
- f) If all of the above fails, call the office
- 11. Constipation is a frequent complaint post-operatively. Remember that any pain medication will slow down bowel movements. Also consider the fact that the patient does not eat as much as usual, nor are they as active physically, which affects daily bowel movements. The patient is also eating a soft diet of very binding foods. Therefore, any "over-the-counter-"method would be acceptable to remedy this problem. If this persists, call your primary care provider.

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