Care After Tonsils and/or Adenoids are Removed
Age 2 through 5

Most children take 7 to 10 days to recover. Some feel better in a few days. Others take as long as 14 days to get back to normal. **Drinking plenty of fluids will help your child heal.** Have these on hand at home a few days before surgery:

- Sports drinks such as Gatorade® and All Sport®
- Apple juice
- Jell-O
- Popsicles
- Pudding and other soft foods for the first few days

Buy new boxes of acetaminophen and ibuprofen. Out-of-date medicine may not be full strength.

**Symptoms after surgery**

Medicines given during surgery may cause an upset stomach. Your child may even throw up. This should stop within a few hours. If your child still feels queasy (nausea) or throws up (vomits) more than 12 to 24 hours after surgery, call one of the numbers at the end of this handout.

Throat swelling may cause snoring and mouth breathing. In 10 to 14 days breathing should return to normal. If tonsils were very large, your child’s voice may sound different after surgery.

A thick white scab or membrane will form on the back of the throat. This may look like two separate scabs. Sometimes scabs cover the whole back of the throat. Your child will have bad breath. This is normal. Scabs flake off in small pieces your child can swallow without stomach upset or other problems. Flaking starts about 5 days after surgery and lasts about 5 more days. After scabs come off, pain may increase for a couple of days.

**Bleeding**

Minor bleeding can occur. Your child may need to spit out small amounts of blood or bloody saliva. Call one of the numbers in this handout if you see symptoms like these:

- Your child bleeds enough to cause choking or coughing.
- Your child throws up (vomits) blood.
- Your child’s bleeding does not stop or becomes heavy.

If bleeding persists, come to La Crosse. Do not go to a clinic or the hospital in your community. There may not be a doctor trained to deal with bleeding in the throat. In rare cases, a child may need more surgery.

**Fever**

Low grade fever is normal for a few days. Medicine for pain should control fever as well. If it rises above 102 degrees F, call one of the numbers on page 3. There may be an infection.
Drinking

Even if it hurts to swallow, make sure your child drinks plenty of fluids. **Fluids are the key to recovery.** Offer sports drinks, apple juice, popsicles or Jell-O. Coax your child to take even a few sips each time. A small amount of liquid may drip from your child’s nose while he or she drinks. This should stop a few weeks after surgery. If you think your child is not drinking enough, call one of the numbers at the end of this handout. **Watch for these signs of dehydration:**

- Your child does not pass urine more than 2 or 3 times a day.
- The urine your child passes is very dark yellow.
- Your child cries but does not shed tears.

If you cannot get your child to drink enough fluids, contact the nearest clinic or emergency room. Your child may need to have an IV (fluids given through a needle in a vein in the arm or hand). If this service is not offered near you, call one of the numbers at the end of this handout. You may need to bring your child to Gundersen Lutheran in La Crosse.

Eating

Your child may have any soft food he or she is willing to eat. Eating and chewing speed recovery, but you should not force your child to eat. As long as your child is drinking enough, there is no need to worry about how much he or she eats. Many children eat less than normal for at least a week. Some children lose weight. Most gain it back when they return to a normal diet.

Activity

Children need to rest so they can heal. Let your child become more active when he or she feels up to it. Even if your child feels well, there is still some risk of bleeding for up to 14 days. Restrict active games and sports as needed.

Most children can go back to school or day care in 7 to 10 days. Some return sooner. Others take a little longer to heal. Your child can return to normal routine when he or she:

- Eats and drinks a normal diet
- No longer needs pain medicine
- Sleeps through the night

Follow-up

Most children do not need to see the doctor after this surgery. If you have concerns or your child has trouble getting back to normal, please call us. If your child had ear tubes placed or other nasal surgery, a follow-up appointment will be scheduled for 4 to 6 weeks from today.

Safe pain control

Pain may affect how your child eats, drinks and sleeps. It may range from mild to severe and last up to 14 days. Most children have moderate to severe throat pain. Your child may also say “My ears hurt.” (This is because the same nerve goes to the throat and ears.) Jaw and neck pain are likely to have been caused by the way the child was positioned during surgery.

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Care After Tonsils and/or Adenoids are Removed – Age 2 through 5

Here are ways to relieve pain:
- Put an ice collar on your child’s neck if your child will allow it.
- Put a humidifier in your child’s room.
- Empty, clean and refill it daily.
- Give your child pain medicine. A nurse will explain how much to give and how often.

Pain relief instructions
Your child received _________ for pain in the hospital at ______________ (a.m. / p.m.)
After you get home, give the first dose of pain medicine today at ___________ (a.m. / p.m.)

For moderate to severe pain, oxycodone liquid may be prescribed. This is a strong narcotic. Follow dosing directions on the bottle you pick up from the pharmacy. A pharmacist will explain them to you. No refills are allowed. If you need more, contact the provider to have the prescription renewed. A nurse will also explain how to switch back and forth with acetaminophen or ibuprofen.

Your child may not like the taste of oxycodone. It is okay to mix it with a small amount of food, juice or other liquids that taste good.

If your child becomes drowsy, feels queasy or throws up (nausea and vomiting) after taking oxycodone, stop giving this medicine.

Call one of the numbers below right away if:
- Your child has trouble breathing.
- Your child is limp or cannot get up and move around.

Oxycodone may cause constipation. Watch for signs and treat this problem with diet and laxatives as needed.

For mild pain, acetaminophen or ibuprofen may provide enough relief. Follow the dosing schedule in your child’s discharge instructions. A nurse will show you the correct dose of each medicine on charts in this handout. He or she will also explain how to switch back and forth between medicines every 3 to 4 hours. The schedule may look like this:
___ a.m. / p.m. Give acetaminophen (_____ mL)
___ a.m. / p.m. Give ibuprofen (_____ mL)
___ a.m. / p.m. Give acetaminophen (_____ mL)
___ a.m. / p.m. Give ibuprofen (_____ mL)

If your child refuses oral pain medicine, ask your pharmacist for acetaminophen suppositories.

Contact information
8 a.m. to 5 p.m. weekdays
Otolaryngology / Head and Neck Surgery (ENT)
(608)775-2374 or (800) 362-9567, ext. 52374
Ask to speak to a nurse. He or she will consult the doctor on call. You may need to come to the clinic or Trauma and Emergency Center in La Crosse.

After hours, weekends and holidays
Telephone Nurse Advisor
(608) 775-4454 or (800) 858-1050
Ask the nurse to page the otolaryngologist on call.

continued...
Care After Tonsils and/or Adenoids are Removed – Age 2 through 5

Acetaminophen – Generic or brands like Tylenol®

- Give a dose every 4 hours as needed.
- Give no more than 5 doses in 24 hours.
- tsp = teaspoon (Do not use a spoon you eat or cook with.)
- ml or mL = milliliter

<table>
<thead>
<tr>
<th>Weight of Child</th>
<th>Acetaminophen suspension, elixir or syrup 160 mg in 5 mL</th>
<th>Acetaminophen chewable children's tablets 80 mg chewable tablet</th>
<th>Acetaminophen junior chewable tablets or caplets 160 mg chewable tablet or caplet</th>
</tr>
</thead>
<tbody>
<tr>
<td>6-11 pounds</td>
<td>¼ tsp 1.25 mL</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12-17 pounds</td>
<td>½ tsp 2.5 mL</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18-24 pounds</td>
<td>¾ tsp 3.75 mL</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25-35 pounds</td>
<td>1 tsp 5 mL</td>
<td>2 tablets</td>
<td></td>
</tr>
<tr>
<td>36-47 pounds</td>
<td>1½ tsp 7.5 mL</td>
<td>3 tablets</td>
<td></td>
</tr>
<tr>
<td>48-59 pounds</td>
<td>2 tsp 10 mL</td>
<td>4 tablets</td>
<td>2 caplets or tablets</td>
</tr>
<tr>
<td>60-71 pounds</td>
<td>2½ tsp 12.5 mL</td>
<td>5 tablets</td>
<td>2½ caplets or tablets</td>
</tr>
<tr>
<td>72-95 pounds</td>
<td>3 tsp 15 mL</td>
<td>6 tablets</td>
<td>3 caplets or tablets</td>
</tr>
<tr>
<td>Over 95 pounds</td>
<td>4 tsp 20 mL</td>
<td>8 tablets</td>
<td>4 caplets or tablets</td>
</tr>
</tbody>
</table>

Look for these numbers on the package or bottle:

160 mg per 5mL
or
Acetaminophen 160 mg in each 5mL

Drug Facts
Active ingredient (in each 5 mL) | Purposes
Acetaminophen 160 mg | Fever reducer/pain reliever
Uses | temporarily:
■ reduces fever
■ relieves minor aches and pains due to:
■ the common cold
■ flu ■ headache ■ sore throat ■ toothache

continued...
Ibuprofen – Generic or brands like Motrin® and Advil®

- Give a dose every 6 hours as needed to a child **6 months** or older.
- Give no more than 4 doses in 24 hours.
- tsp = teaspoon (Do not use a spoon you eat or cook with.)
- ml or mL = milliliter

<table>
<thead>
<tr>
<th>Weight of Child</th>
<th>Ibuprofen infant drops <strong>50 mg in 1.25 mL syringe</strong></th>
<th>Ibuprofen suspension <strong>100 mg in 5 mL</strong></th>
<th>Ibuprofen chewable children’s tablets <strong>50 mg chewable tablet</strong></th>
<th>Ibuprofen junior chewable tablets or caplets <strong>100 mg caplet or chewable tablet</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>12-17 pounds</td>
<td>1.25 mL</td>
<td>½ tsp 2.5 mL</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18-23 pounds</td>
<td>1.875 mL</td>
<td>¾ tsp 3.75 mL</td>
<td></td>
<td></td>
</tr>
<tr>
<td>24-35 pounds</td>
<td>2.5 mL</td>
<td>1 tsp 5 mL</td>
<td>2 tablets</td>
<td></td>
</tr>
<tr>
<td>36-47 pounds</td>
<td></td>
<td>1½ tsp 7.5 mL</td>
<td>3 tablets</td>
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</tbody>
</table>

**Medicine Spoon**
- Marked in milliliters (mL or ml)
- Marked in teaspoons (tsp)

**Syringe**
- Marked in milliliters (mL or ml)

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